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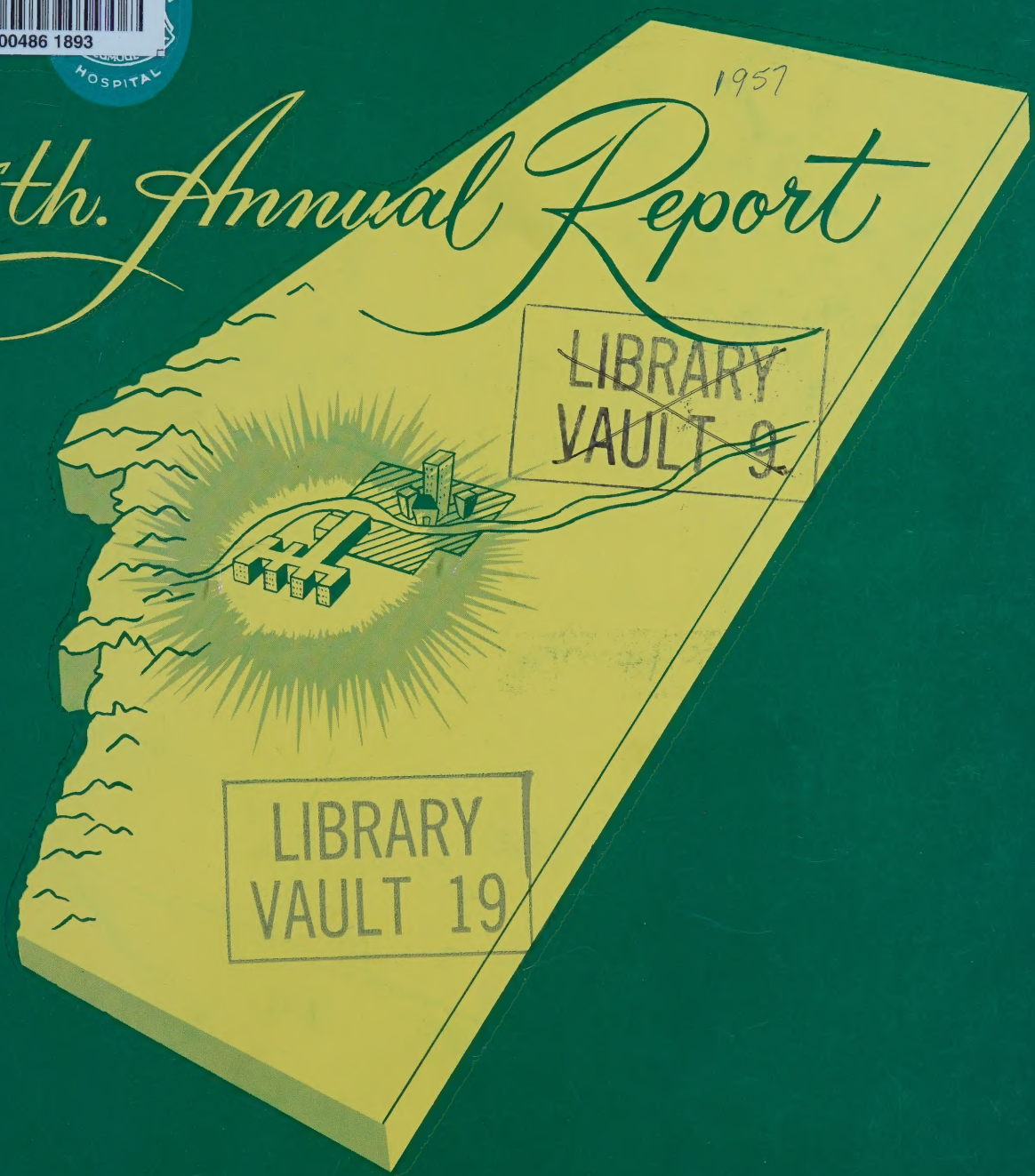
# 35th. Annual Report



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UNIVERSITY OF ALBERTA HOSPITAL, EDMONTON, ALBERTA

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# UNIVERSITY OF ALBERTA HOSPITAL

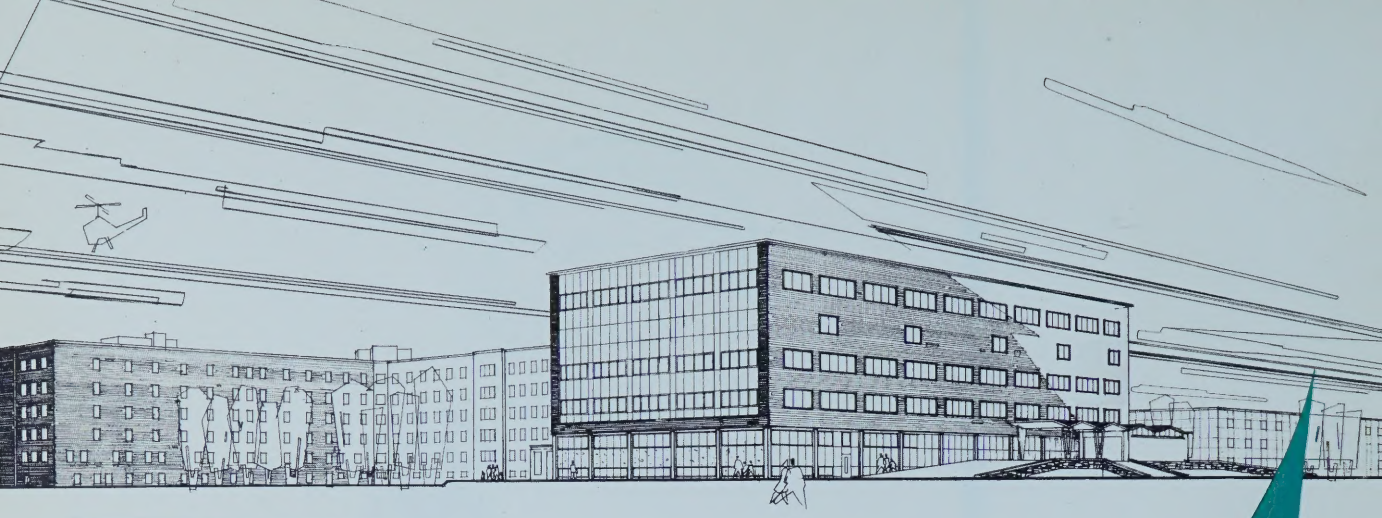
# *Thirty Fifth*
# annual report

FOR THE FISCAL YEAR ENDING MARCH 31, 1958

**DEDICATION**

*To all those who have served and are serving the cause of health through the medium of the University of Alberta Hospital, this report is dedicated.*

A. C. McGUGAN, M.D.,
Superintendent.



Architect's sketch showing east elevation of hospital and north and east elevations of the projected service unit now under construction which will house the following services: Emergency, Out-patient, Admitting, Radiology, Clinical Laboratories, Operating Suites. Laundry, Stores, Maintenance and Auditorium not shown.

University Hospital—South view—showing Poliomyelitis and Rehabilitation Building (left) and 1952 addition (right)

## A HISTORICAL DIGEST

A. C. McGUGAN, M.D.

In hospitalization, as in every sphere of activity on the University of Alberta campus, one is astounded at the progress made during the past fifty years. Today the campus resounds with the chatter and laughter of several thousand students. Fifty years ago in the same area one might have heard the half beat of the tom tom and the chanting of Indians. Many residents of the Garneau District can recall a time when the family cow was pastured on the campus. The donor of the picture below (Figure 1) is still a very active woman. She is also the little girl pictured in the background.

South West Corner of Jasper Avenue and 102nd Street - 1902
Figure 1.

Without some knowledge of history there can not be an adequate appreciation of one's debt to the past, and without a consciousness of his debt to the past, man would be a poor creature indeed.

Essentially, the early history of the University of Alberta Hospital is the history of hospitalization in Strathcona. The first "hospital" staffed by a trained nurse was opened at the Hermitage in 1886. The following is extracted from the Edmonton Bulletin, August 7, 1886: "Miss Newton, who has lately arrived from England to reside with her

The Hermitage
Figure 2.

brother, The Reverend Canon Newton, is a regularly trained nurse in the Church of England. Miss Newton, should her health permit, hopes to resume her hospital duties at the Hermitage." Shortly after, Miss Newton opened a hospital at the Hermitage, in the Lower Settlement, eight miles down the river from Fort Edmonton. She advertised that she was prepared to treat patients, especially women and children, and that her fees were moderate. There does not appear to be a record of progress of the venture. However, Miss Newton had a card in the News-Plaindealer of March, 1891, to the effect that she was prepared to do nursing and midwifery—rate ten dollars per week.

In 1906 Mr. George H. Elliott, a Strathcona general merchant and councillor, proposed to the Strathcona Council that a hospital be started. The Council authorized him to proceed. Within a week he had rented a partly-finished building which had been intended as a boarding-house. It was located on 78th Avenue, between 104th and 105th Streets. The Strathcona citizens rallied around the new enterprise. The South Side boys put on a baseball tournament, and with their profits purchased a sewing machine for the hospital. Mrs. Elliott donated two feather beds and used the feathers to make pillows for the hospital. The ladies of the community made up pillow cases, sheets and towels. The first Strathcona hospital was indeed a community project. It was finished and occupied within a month from the day it was proposed to the Council by Mr. Elliott. Within a few weeks every available foot of space was crowded with beds. Typhoid fever had broken out from the drinking of contaminated river water. Soon the hospital was too small and the second

floor of an Oddfellows' hall was rented as a hospital. Pictured below (Figure 3) is the original Strathcona Hospital. The medical staff consisted of Dr. Evan Greene, now residing in Edmonton; Dr. Crang (deceased); and Dr. May (deceased). The nursing staff of three consisted of Miss Dickson (now Mrs. Fuller), Matron; Miss Hayme (now Mrs. McGee); and Miss Falls (married name unknown to writer).

First Strathcona Hospital
Figure 3.

About 1907 the City of Strathcona acquired Block 172 (later the site of the Gyro playground and presently known as Tipton Park) as a hospital site at a cost of $10,000. A debenture by-law for $70,000 was approved by the burgesses and $20,000 worth of bonds were sold. Plans were completed and excavation begun, when the late 1907 "slump" came and work was discontinued. This site was abandoned in favor of a location on the University campus. The University agreed to provide "all that piece of property between 84th and 87th Avenues, and 112th and 114th Streets" as a hospital site, provided that the City build a building to cost not less than $100,000. The University agreed to take over the outstanding debentures if and when a medical school was established. Actually the building, equipment and furnishings totalled $351,794, of which total Lord Strathcona donated $25,000 and certain sundry donors contributed $1,927. A referred by-law setting out the above terms was submitted to the burgesses on July 3, 1911, and approved by a vote of 133 in favor and two against. The necessary documents were executed on January 31, 1912, immediately prior to the final amalgamation of Strathcona and Edmonton. The Amalgamation Act provided that the newly-formed municipality would assume the obligations of Strathcona. The Strathcona Hospital Board was created by by-law on December 15, 1911. Immediately plans for the Strathcona Hospital were begun. Mr. Meyer J. Sturn of Chicago was engaged as consulting architect, and resident architects were Messrs. Wilson and Herrald. The building contract was let to Olsen and Johnson of Missoula, Montana, for $211,082. When finished, furnished and equipped with the relatively inexpensive equipment of that period, the 150-bed hospital cost $2,345 per bed. This cost is about 10% of the per bed cost of a similar hospital today. This may sound low-priced, but it isn't. The purchasing power of a hospital-building-equipment dollar of 1958 is just about 10% of what it was in 1912.

The corner stone of the Strathcona Hospital was laid by Mayor Short on June 25, 1913. There is an interesting account of the event in the June 26th issue of the Edmonton Bulletin. A few sentences extracted therefrom follow.

"The corner stone of the new South Side Civic Hospital on the grounds of the University of Alberta was well and truly laid by Mayor Short in the presence of a large crowd of spectators yesterday."

"Speeches were made by Alderman Tipton, J. M. Douglas, M.P., and Major C. W. Marriott, Chairman of the Hospital Board."

"Alderman Tipton . . . contrasted the few hospitals of fifty years ago with the municipal hospitals now so common."

"J. M. Douglas, M.P., said that as an old-timer he was gratified at the growth of the city . . . and he praised Chancellor Rutherford and President Tory of the University of Alberta for their interest in the hospital."

Figure 4.

University Hospital 1923 S.C.R. Wing 1923

"Major G. W. Marriott . . . traced the history from 1906, showing the growth from 15 beds in the old building on 4th Avenue S.W. to the prospect of 86 beds in operation by December 1, 1913."

"In the cavity of the corner stone were placed the following documents: A historical sketch of the hospital; a list of board and staff; copies of plans of building; coins of the realm; latest copies of the Bulletin, Capital-Journal and News-Plaindealer; and a list of workmen on the building."

"The Mayor . . . said it gave him pleasure to lay the corner stone of a building that so showed the Christian magnanimity of mankind."

The Strathcona hospital was completed and occupied in February, 1914, with 84 beds in use and room for 66 more; and on December 1, 1916, the City leased the hospital to the Federal Military Hospitals Commission "during the war and thereafter for a period of three months from the official declaration of peace." The Strathcona hospital was turned over to the University of Alberta in November, 1922. The University agreed to issue $150,000 in debentures to the City of Edmonton. The erection of an 85-bed hospital for Soldiers' Civil Re-establishment cases was started immediately and completed in 1923. Thereafter the entire plant was to be known as the University of Alberta Hospital and administered by the Board of Governors of the University of Alberta.

The Board of Governors of the University appointed a University of Alberta Hospital Board of Management in November, 1922, consisting of: President H. M. Tory, Chairman; Dean W. A. R. Kerr; Dean A. C. Rankin; and Mr. A. West (Bursar). Doctor Roderick T. Washburn, who had been Superintendent of the Strathcona Hospital under the S.C.R., was retained as Superintendent of the University Hospital.

On December 5, 1922, a Medical Advisory Board was appointed consisting of Dr. F. H. Mewburn, Dr. J. J. Ower, and Dr. H. C. Jamieson. On December 29, 1922, the following were given clinical appointments by the University on the staff of the hospital:

*Surgical*—Drs. F. H. Mewburn, Gordon Gray, W. A. Wilson, A. R. Munroe, L. C. Conn, H. H. Hepburn, A. Blais, E. C. Smith, and Evan Greene.

*Medical*—Drs. H. C. Jamieson, H. B. Logie, Irving Bell, D. B. Leitch, C. W. Hurburt, and W. H. Scott.

*Pathology*—Dr. J. J. Ower.

*E.E.N. and Throat*—Drs. R. B. Wells and C. V. Jamieson.

*Laboratory*—Dean Rankin (Bacteriology), Dr. J. B. Collip (Biochemistry), and Dr. J. J. Ower (Pathology).

Figure 5.

1929 Addition (From Center Door to South End)

On September 28, 1923, the Board recommended that the Senate be requested to constitute a School of Nursing for two groups of students; one group to pursue a three-year course, and the other to pursue a five-year course leading to a B.Sc. degree in Nursing. Miss Margaret McCammon was appointed Superintendent of Nurses.

On April 25, 1924, the first Resident Medical Officer, Dr. A. M. Crawford, was appointed.

The hospital operated under the Board of Governors of the University until an "Act Respecting the University of Alberta Hospital" was proclaimed on March 20, 1929. By this Act a Hospital Board came into existence which was composed of an equal number of members appointed by the Governors of the University and the Lieutenant Governor-in-Council. The Board was composed of President R. C. Wallace and Dr. M. R. Bow, Deputy Minister of Health, each for a term of three years; Mr. H. H. Cooper and Mr. John Gillespie, each for a term of two years; Dr. A. C. Rankin and Mr. W. B. Milne, each for a term of one year.

A new wing which was planned as an addition to the south end of the old Strathcona hospital was planned early in 1929, and construction was started in the winter of 1929-30. This new 122-bed addition was opened on October 17, 1930.

With the opening of the 1929 addition, there came a period of economic depression and poverty which lasted about a decade. This period was followed by six years of war. From 1939 to 1945 the hospital was essentially a military hospital again, although it was not designated as such. The period from 1930 to 1945 was a trying one from all points of view. Thanks to the loyalty and self-sacrifice of the medical staff, the struggling hospital and medical school not only survived but progressed.

In 1943 it was found that the Old Soldiers' Civil Re-establishment Building was completely inadequate. The Federal Government (Department of Veterans' Affairs) agreed to build a 250-bed addition. This building was to be serviced from the University Hospital much as the S.C.R. unit had been. The pavilion was formally opened in February of 1945 and designated "The Colonel Mewburn Pavilion". It was named in honour of our first Professor of Surgery, Dr. F. H. Mewburn.

Since the opening of the Strathcona hospital in 1913 there had been talk of building a nurses' residence and teaching unit. Thirty-four years had elapsed before the first unit of our presently existing gracious residence was formally opened in 1947. With the discovery of oil in Alberta money for expansion became more readily available. An addition was provided for the nurses' residence and the south-east addition was built on the University Hospital. These two buildings were formally opened on September 4, 1951. South Edmonton has had two periods of rapid expansion. These were from 1892 to 1912, and from 1938 to 1958. The picture below shows Whyte Avenue in the 1890's. Hospitalization in Strathcona shared in this expansion.

Figure 6.

Whyte Avenue in the 1890's

After the Second World War there was a definite renaissance in medical education, research and direct patient service. Of those returning from active service overseas there were many who required rehabilitation in one or more of its many phases—physical, mental, social, economic, et cetera. The Faculty of Medicine of the University of Alberta established a Graduate Training Course which provided five years of post graduate training in one of the many medical specialties. Presently the University of Alberta Hospital is approved by the Royal College of Canada for training in all the specialties. Research has made tremendous strides in the hospital in the past decade, and especially in the past five years. Records of the research projects in operation here are outlined elsewhere in this report. Those of our Graduate Training Course who have attained Specialist Certification and Fellowship in the Royal College of Canada, and some who have been trained elsewhere, have returned to our staff to serve the people generally, and the people of Alberta particularly, in specialized medical services, teaching, and research. As this report goes to press on October 1, 1958, our graduate house staff in training, consisting of interns, residents, and fellows, totals eighty-seven. To provide accommodation for this group, about sixty per cent of whose members are married, a house staff residence was built and opened for occupancy on July 1, 1958.

Two world wars and several extensive crippling poliomyelitis epidemics pointed the need for more adequate services in rehabilitation. A School of Physiotherapy at the University, and the opening of our new rehabilitation wing in 1958, together with the expansion of psychiatric services, have been our response insofar as physical and mental rehabilitation are concerned. It would appear that society is still charged with the economic and social rehabilitation of patients after they have been rehabilitated to the degree possible from the mental and physical aspects.

For many years we have been adding beds by the hundreds to the hospital without making provision for expansion in such service units as outpatient, emergency, admitting, clinical laboratories, x-rays, operating suites, laundry, kitchen, class rooms, et cetera. Construction and plans are presently in progress to correct this deficiency.

The twentieth century has seen a marked transition in the concept of hospitalization. Formerly the provision of hospitalization was delegated by society to private philanthropy and the Church. The concept of municipal, provincial, and federal hospitalization gradually has replaced that of hospitalization by voluntary agencies. The changing concept has resulted largely from economic and political pressures. Hospitals have become huge diagnostic and treatment centers. There has been a very material increase as a result in hospital costs. In the past decade or so the yardstick for hospital administration has changed from the old standard of "How little can we spend" to "The best available for the patient". The University Hospital of 1958 is well staffed and equipped to continue its historical role of specialized referral service, teaching, and research. The view of the hospital below (Figure 7) shows the plant as it presently (1958) appears from the air.

Figure 7.

Aerial View, University of Alberta Hospital 1958

1 Mewburn Pavilion
2 South Pavilion
3 Provincial Cancer Clinic
4 Service Building (under construction)
5 Original Hospital
6 1930 Addition
7 1951 Addition
8 Rehabilitation Addition 1957
9 Public Health Building
10 House Staff Residence
11 Nurses' Residence

# REPORT OF THE SUPERINTENDENT

Mr. D. J. Avison,

Chairman,

University of Alberta Hospital Board.

Sir:

I have the honour to submit this, the thirty-fifth annual report, covering the operation of the University of Alberta Hospital for the fiscal year ended March 31, 1958. This report is designed for submission early in 1959. In order that some events herein may not be too outdated, certain incidents are recorded up to the date of compilation of this report.

## PERSONNEL OF THE HOSPITAL BOARD

*Personnel of the Hospital Board*

We are pleased to record the appointment of Mr. Elmer E. Roper as a member of the Hospital Board. Mr. Roper succeeds the late Mr. William J. Dick.

## DEATHS AMONG STAFF MEMBERS

*Deaths Among Staff Members*

We are pleased to report that for the first time in many years there have not been any deaths among the members of our medical staff.

## APPOINTMENTS AND RESIGNATIONS

*Appointments and Resignations*

APPOINTMENTS:

The following appointments have been made during the year:

G. O. Bain, B.Sc., M.D. (Alberta); L.M.C.C.; Spec. Cert. Path. R.C.P.S. (C) and Alberta—Pathology

T. A. S. Boyd, M.B., Ch.B. (Glasgow); D.O.M.S. of R.C.S. (England), F.R.C.S. Ophthl. (England)—Ophthalmology

G. D. Brown, B.Sc., M.D. (Alberta); L.M.C.C.; Spec. Cert. Int. Med. R.C.P.S.(C)—Internal Medicine

L. B. Brown, B.Sc., M.D. (Alberta); L.M.C.C.; Spec. Cert. Obs. and Gyn. R.C.P.S.(C); F.R.C.S.(C)—Obstetrics and Gynaecology

A. Cairns, M.D. (Alberta); L.M.C.C.; Spec. Cert. Int. Med. Alberta—Internal Medicine

G. J. Conradi, M.D. (Jena); L.M.C.C.; Spec. Cert. Paed. R.C.P.S.(C); Spec. Cert. Paed. (Hamburg)—Paediatrics

C. M. Couves, B.A. (Saskatchewan); M.D. (Manitoba); F.R.C.S. (Edinburgh); F.A.C.S.; F.R.C.S. (C); Dipl. Amer. Bd. Gen. Surg.—Surgery

J. Guild, B.Sc., M.D. (Alberta); D.P.M. (England); Spec. Cert. Psy. R.C.P.S.(C)—Psychiatry

R. S. Henderson, M.R.C.S. (England); L.R.C.P. (London); F.R.C.S. (England); F.R.C.S.(C); F.A.C.S.—Orthopaedic Surgery

P. J. Kimmitt, B.Sc., M.D. (Alberta); L.M.C.C.; Spec. Cert. Paed. R.C.P.S. (C)—Paediatrics

G. M. Little, M.D. (Manitoba); D.P.H.—Consulting Appointment

L. E. McLeod, B.Sc., M.D. (Alberta); M.Sc. (McGill)—Internal Medicine

B. D. Margolus, M.D. (Alberta); L.M.C.C.; F.R.C.S.(C)—General Surgery

E. S. Orford Smith, M.A., M.B., B.Ch. (Cantab.); L.R.C.P. (London); M.R.C.S. (England); D.P.H. (London); D.I.H. (England)—Consulting Appointment

W. C. Taylor, M.B., Ch.B. (Aberdeen); D.C.H. (England); Spec. Cert. Paed. R.C.P.S.(C)—Paediatrics

RESIGNATIONS

D. Gunn—Radiology

## SPECIAL SERVICE DEPARTMENTS

*Special Service Departments*

The new poliomyelitis and paediatric building was put into full operation during the year. There is an 80-bed paediatric ward. The former paediatric ward has been retained and our total of paediatric beds is now 140. The building has been designed primarily for the care of poliomyelitis patients and for the residual disabilities of poliomyelitis. A 30-bed unit for the rehabilitation of paralyzed patients is in full operation. We still have some 20 cases of bulbar poliomyelitis. These patients require some form of assisted breathing for some part of the day. Rocking beds and chestpirators provide a great deal of the assisted breathing. Only three of the patients require the box-type respirator. We average about 35 non bulbar poliomyelitis cases. These are admitted periodically for the assessment of residual disabilities and for corrective surgery where indicated. The purpose of the rehabilitation department is to put the patient back into society and to train him to become an independent member of society to the degree possible. The physiotherapists, occupational therapists, and diversional therapists do not expect dramatic results. However, if they can give any patient a reasonable percentage of functional improvement, that improvement spread over a period of years constitutes a very material contribution to the individual and to society in general.

The cardiology and cardiac surgery teams have obtained dramatic results. Since these units started to function actively about five years ago, about 150 children who would have either been dead by now or would have been complete cardiac cripples, have been returned to their homes as normal, happy children. Presently the cardiologists are attempting to provide a temporary artificial circulatory system for premature infants who require such support. Oxygenators (artificial hearts) are being improved periodically. It is the policy of this hospital to obtain the best equipment available.

In the urology department the artificial kidney has been used in two cases of renal emergency. It has functioned very satisfactorily indeed. The purpose of the artificial kidney is to take over the function of the kidneys in cases of acute renal insufficiency. It can only be expected to tide the patient over for a period of from twelve to twenty-four hours. In selected cases it constitutes a life-saving device.

The special services which we had previously established have continued to become increasingly active. Particular reference might have been made to such laboratories as the metabolic, pulmonary function, radioisotope, and electroencephalographic. The ultramicrochemistry laboratory, which we opened about a year ago, has been particularly useful in the study of children's diseases. Ultramicrochemistry enables the paediatric staff to make blood studies on small amounts of blood such as may be obtained from children.

## OUT-PATIENT DEPARTMENTS

*Out-Patient Departments*

The hospital operates several out-patient departments, both on the hospital premises and in the city centre area at the Alberta-Jasper Building. The concept of the function of out-patient departments has been changing over a period of years. Formerly out-patient departments were designed for the diagnosis and treatment of individuals who could not afford private medical care. Now out-patient departments are designed to serve anyone who wishes to consult a physician or surgeon.

## EMERGENCY DEPARTMENT

*Emergency Department*

The hospital also operates a large emergency department with emergency examining and operating rooms. As a result of the phenomenal growth of Edmonton during the past ten years and the increased industrialization, there has been an ever increasing demand for emergency accident services. The emergency department may treat anywhere from 50 to 150 patients in a twenty-four hour day. The average number treated per day is about 100.

## *Training and Research*

## TRAINING AND RESEARCH

RESEARCH

The hospital continues to receive grants of money for research from many sources. Like any other enterprise or service, it is men and women who give the hospital its reputation. A number of outstanding individuals on our staff have attracted research grants from governmental, voluntary aid, and philanthropic groups. References to addresses, publications, and research projects will be included with each of the departmental reports which appear herein.

MEDICAL STUDENTS:

A large part of the academic instruction in medicine in the two senior undergraduate years and a large number of clinics are offered in this hospital. In keeping with the general trend in medical education it is probable that within the next five years all the instruction given to members of the two senior undergraduate years will be given in hospitals, and that most of it will be given in this hospital.

*Teaching at the Medical Graduate Level*:

## TEACHING AT THE MEDICAL GRADUATE LEVEL

The University of Alberta Hospital has been approved by the Royal College of Canada for the training of doctors at graduate levels in all specialties. Many practitioners, after a few years in general practice, return to take one of these courses. The courses are five-year courses, designed to enable those taking them to qualify for certification or fellowship examinations in the Royal College of Physicians and Surgeons of Canada.

*Nursing*

## NURSING

The addition to our nurses' residence is now in full operation. A large number of classrooms and laboratories have been provided and there is now living accommodation for 400 in the residence. In spite of the fact, or perhaps because of the fact, that we require university entrance qualifications for admission to the school, we have no difficulty in getting applicants. We plan to graduate 120 nurses per year. The teaching staff in our training school for nurses has an establishment of 18 full-time teachers.

*Those Served*

## THOSE SERVED

The movement of population to large centers and the increase in the size of the City of Edmonton is reflected in our admission picture. Some ten years ago about 60% of our admissions were from outside the City of Edmonton, and 40% from the City. Presently our admissions are made up of about 51% from outside the City of Edmonton, and 49% from the City itself. Of the 51% from outside the City of Edmonton, 28% are from rural Alberta, 20% from other urban centers in the Province, and 3% from outside the Province. Approximately 90% of the patients admitted to this hospital are referred to members of the attending staff. These referred cases have been referred because they present special problems in diagnosis and treatment. The University of Alberta Hospital operates the Colonel Mewburn Pavilion for the Federal Department of Veterans' Affairs, and provides all services including nursing, food, x-ray, surgical, laboratory, and rehabilitation services.

Our chief problem in the provision of services is one common to all enterprises on this continent. It is that of obtaining, training, and retaining staff in all categories.

*Voluntary Aid*

## VOLUNTARY AID

The Administration wishes to express appreciation for the large amount of voluntary aid received during the year. While it is difficult to enumerate all groups which have provided assistance to the hospital, we wish to acknowledge the very material assistance received from our Hospital Women's Auxiliary in the care and entertainment of patients and in taking disabled patients on outings.

Members of the Auxiliary also gave a considerable amount of their time to teaching long term patients. The Alberta Division of the Canadian Foundation for Poliomyelitis has continued to assist poliomyelitis patients. We wish also to acknowledge services, gifts, donations, books, flowers, toys, treats, and entertainment given by The Junior Hospital League, The Voluntary Services Bureau, The Army and Navy Ladies' Auxiliary, The War Amputees Association, The Silver Cross Mothers, The Salvation Army, The Ladies' Orange Benevolent Association, The Canadian Red Cross, The Lady Aberdeen League, The Canadian Corps, The Women's University Club, The Women's Liberal Club, The Twentieth Century Club, Garneau United Church, Metropolitan United Church, The Catholic Council of Women, The Jewish Council of Women, Garneau Young People's Club, The Kiwanis Club, The Kinsmen Club, The Associated Canadian Travellers' Association, The Alberta Division of the Canadian Cancer Association, The Merrill Muttart Foundation, The Edmonton Rotary Club and Mr. J. W. Hughes of Kelowna, B.C., the Library of the Department of Education, The Faculty of Agriculture, The Department of Extension, The Brownies, C.G.I.T., Mr. and Mrs. J. R. Calhoun of The King Edward Hotel, The I.O.D.E., The Canadian Legion (Ladies' 215, Kingsway, Montgomery, Strathcona, Provincial Command, Norwood), Mrs. G. Y. Dorland, The South Side Progressive Conservative Headquarters, and Mr. W. G. Chipman. The Edmonton Exhibition Association, The Theatre Managers' Association, The Edmonton Eskimo Football Club, and The Eskimo Baseball Club have generously donated many seats to patients during the year. Much of the voluntary work has been given through the guidance and co-ordination of Mr. Harold Wright, to whom we express our thanks. We also sincerely appreciate the work done by the University of Alberta Hospital School of Nursing Alumnae in relation to the graduate and student nurses of the hospital.

No doubt we have failed to acknowledge help from a number of sources. For these omissions we apologize.

The hospital was pleased to welcome the following distinguished visitors during the year: Sir James Paterson Ross, Senior Surgical Professor at the University of London, Surgeon-in-Chief at St. Bartholomew's Hospital, and Vice President of the Royal College of Surgeons of England: Professor Charles A. Wells of the Department of Surgery, University of Liverpool: Professor John Bruce, Regius Professor of Clinical Surgery, University of Edinburgh: Professor Melville Arnott, The Sims Commonwealth Travelling Professor for 1957 and Professor of Medicine, University of Birmingham: Sir Walter Mercer, Professor of Surgery, University of Edinburgh, Past President of the Royal College of Surgeons, and Surgeon to the Queen: Dr. R. F. Farquharson, Professor of Medicine, University of Toronto: The Honourable A. J. Brooks, Minister of Veterans' Affairs and Mr. L. Lalonde, Deputy Minister of Veterans' Affairs: Doctor J. N. Crawford, Director General of Treatment Services for the Department of Veterans' Affairs: Mr. Benjamin K. Rank, Sims Commonwealth Travelling Professor for 1958 and Honorary Plastic Surgeon, The Royal Melbourne Hospital.

It affords me pleasure to acknowledge the help which I have received from the members of the Hospital Board, and the loyal cooperation which I have received from all professional and lay departments of the hospital. The loyalty of the members of our staff has made it possible for us to maintain and improve our standards of patient care, research, and teaching services.

All of which is respectfully submitted.

A. C. McGugan, M.D.
Superintendent

# FINANCES

**Year Ended**
**March 31, 1958**

## OUR MAIN SOURCES OF INCOME

| | |
|---|---|
| Federal Government on behalf of D.V.A. and D.N.D. patients | 757,000.00 |
| Provincial government—direct hospitalization payments | 995,000.00 |
| Provincial-Municipal Hospitalization Plan | 667,700.00 |
| Private and Semi-Private differentials | 181,000.00 |
| Other Sources—Private patient revenue, W.C.B., Blue Cross, Private Insurance | 1,896,300.00 |

## OUR PRINCIPAL DISBURSEMENTS

| | |
|---|---|
| Payroll | 2,922,000.00 |
| Food | 394,000.00 |
| Medical Supplies | 663,000.00 |
| Maintenance including Light, Heat and Water | 401,600.00 |
| Miscellaneous | 129,400.00 |

## PRINCIPAL ASSETS OF THE HOSPITAL

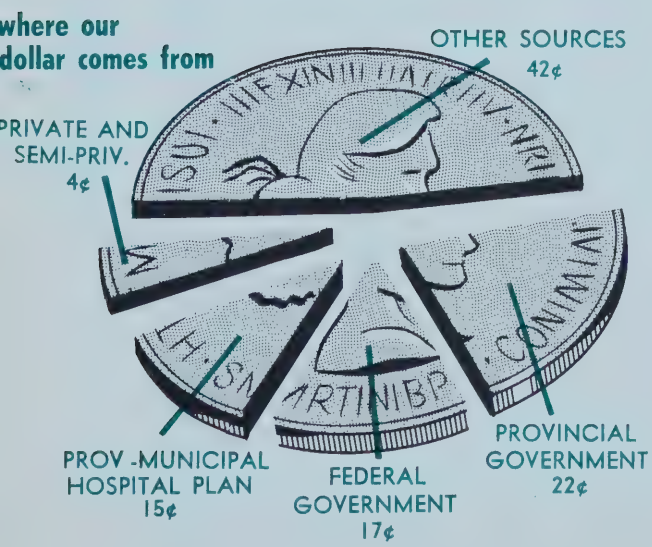
| | |
|---|---|
| Cash on hand and in Bank | 437,000.00 |
| Inventories | 205,000.00 |
| Accounts Receivable—less provision for doubtful accounts | 774,000.00 |
| Reserve Accounts | 750,000.00 |
| Plant Funds—including land, buildings and equipment | 10,712,000.00 |

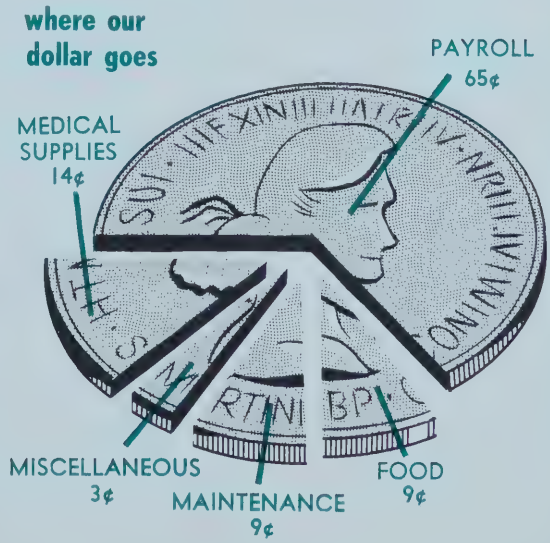
## CURRENT LIABILITIES

| | |
|---|---|
| Trade Accounts—Salaries and Wages due | 246,000.00 |
| Advance for working Capital | 147,000.00 |

## SOURCE OF CAPITAL FUNDS

| | |
|---|---|
| Province of Alberta | 9,910,000.00 |
| University Hospital | 1,481,000.00 |



# REPORT OF THE BUSINESS ADMINISTRATOR

Mr. D. J. Avison,

Chairman,

University Hospital Board.

Sir:

I herewith submit financial report for the year ended March 31st, 1958.

## COMPARATIVE STATEMENT OF DISBURSEMENTS

| | 1955 | 1956 | 1957 | 1958 |
|---|---|---|---|---|
| Payroll | 1,924,300 | 2,101,600 | 2,312,700 | 2,922,000 |
| Food | 392,000 | 383,800 | 397,100 | 394,000 |
| Medical Supplies | 459,200 | 476,800 | 516,500 | 663,000 |
| Plant Maintenance, including depreciation and utilities | 223,700 | 294,100 | 314,100 | 401,600 |
| Miscellaneous | 84,200 | 102,700 | 105,200 | 129,400 |

## PERCENTAGE OF HOSPITAL DOLLAR EXPENDED

| | 1955 | 1956 | 1957 | 1958 |
|---|---|---|---|---|
| Payroll | 62¢ | 63¢ | 63¢ | 65¢ |
| Food | 13 | 11 | 11 | 09 |
| Medical Supplies | 15 | 14 | 14 | 14 |
| Plant Maintenance | 07 | 09 | 09 | 09 |
| Miscellaneous | 03 | 03 | 03 | 03 |

During the past year the Polio and Paediatrics wing was opened and by the end of the year most of the beds were in operation. This resulted in an increase in patient days care with an increase in Revenue and a corresponding increase in Expenditure. While total expenditure continues to increase, the proportion chargeable to the main divisions remains fairly constant. The increase of 2% in Payroll and decrease of 2% in Food was due to the placing of all employees on a gross pay basis and opening of a pay cafeteria. The percentage of expenditure for Medical Supplies and Maintenance remained the same at 14% and 9% respectively.

As expected, the opening of the Polio and Paediatrics wing has taxed the facilities of both the clinical services and other service departments of the hospital. Make-shift arrangements have been worked out in the X-ray and Clinical Laboratories and the Operating Room has worked on a partial double shift basis. The Laundry is processing a daily load beyond our expectations. While this is possible on a short term basis, it would be entirely unsatisfactory for an extended period. The Clinical Services addition is under construction at the present time and planning is progressing on the new laundry, shops and stores buildings. When these are completed the service facilities will be adequate to handle the full planned bed establishment of 1,200.

May I again express my sincere appreciation to the Hospital Board for their careful consideration of the problems of administration and to all department directors and heads whose cooperation has so greatly assisted in making the adjustments necessary with the large increase in total beds. Thanks also to the members of the staff of the Department of Public Works and the Department of Health for their continued assistance during the past year.

Respectfully submitted.

L. R. Adshead,

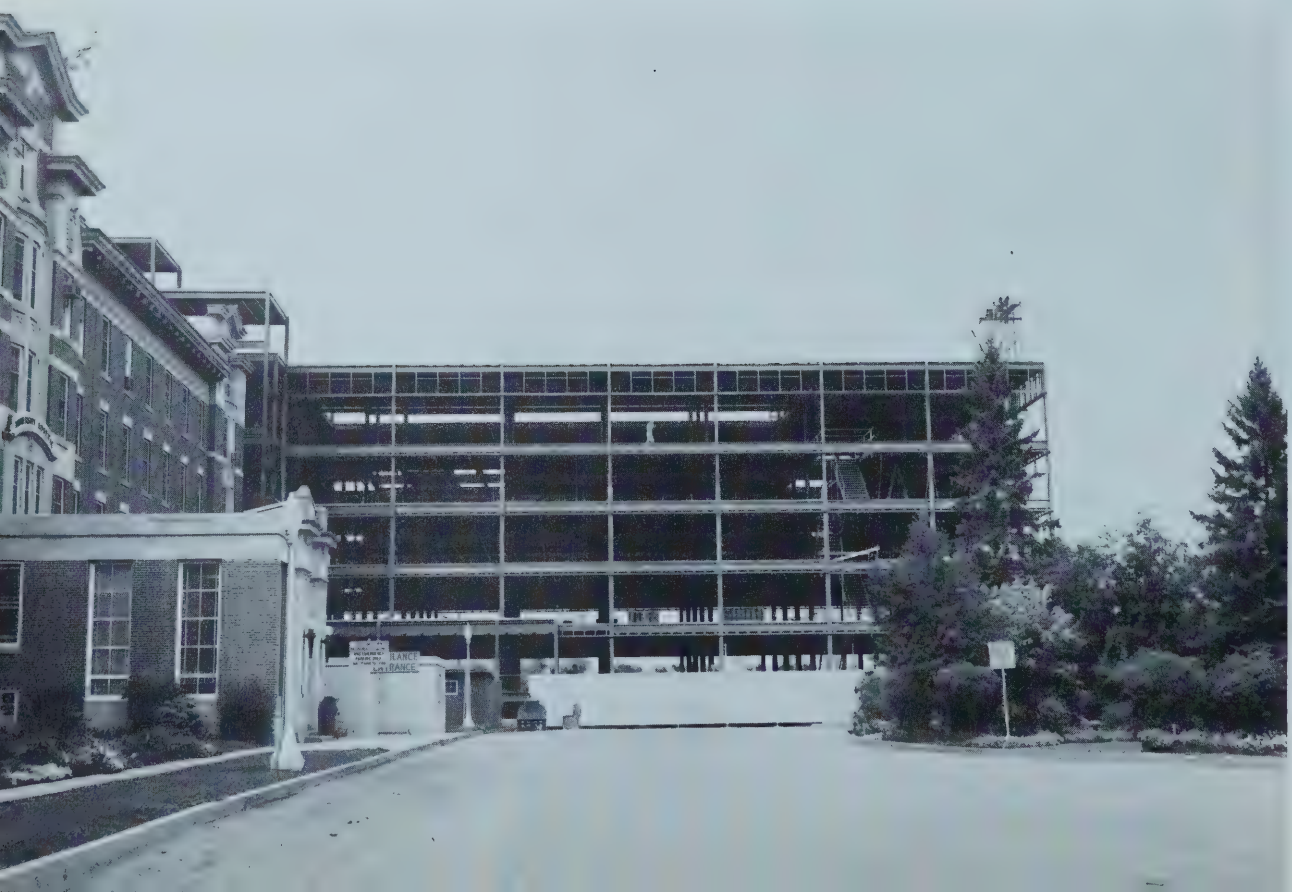
Business Administrator.

# COMPARATIVE STATISTICAL REVIEW

| ADMISSIONS: | 1956-57 | 1957-58 |
|---|---|---|
| Total | 17,813 | 19,885 |
| Private | 915 | 1,115 |
| Semi-Private | 3,457 | 3,393 |
| Public | 8,916 | 9,888 |
| O.P.D. | 387 | 630 |
| D.V.A. | 887 | 1,042 |
| Staff | 203 | 366 |
| Others | 3,048 | 3,451 |
| SEX: | | |
| Male | 8,703 | 9,870 |
| Female | 9,110 | 10,015 |
| RELIGION: | | |
| Protestant | 4,082 | 4,124 |
| Roman Catholic | 3,101 | 3,688 |
| United Church | 3,719 | 4,419 |
| Presbyterian | 692 | 719 |
| Church of England | 2,365 | 2,557 |
| Lutheran | 1,239 | 1,356 |
| Others | 2,615 | 3,022 |
| NATIONALITY: | | |
| British Isles | 2,046 | 2,081 |
| Canada | 12,668 | 14,377 |
| U.S.A. | 998 | 1,066 |
| Others | 2,101 | 2,361 |
| BY DEPARTMENT: | | |
| Medical | 4,248 | 4,751 |
| Surgical | 2,922 | 3,132 |
| Obstetrical | 1,923 | 2,099 |
| Gynaecological | 1,361 | 1,473 |
| E.E.N. & T. | 1,036 | 1,251 |
| Orthopaedic | 1,784 | 1,948 |
| Dermatology | 153 | 151 |
| Neuro-Surgery | 499 | 473 |
| Paediatrics | 709 | 918 |
| Metabolic | 417 | 448 |
| G. U. | 852 | 945 |
| Cardiology | 125 | 328 |
| Others | 1,784 | 1,968 |
| Maximum Admissions any one day | 83 | 97 |
| Minimum Admissions any one day | 12 | 15 |
| Maximum Discharges any one day | 80 | 96 |
| Minimum Discharges any one day | 13 | 5 |
| Maximum in Hospital any one day | 791 | 942 |
| Minimum in Hospital any one day | 501 | 477 |
| Number of patients on hand at beginning of year | 672 | 704 |
| Total number of patients deceased during year | 426 | 495 |
| Total number of patients on hand at end of year | 704 | 895 |
| Total number of patient days | 250,300 | 274,680 |
| Daily average number of patients | 685.75 | 752.54 |
| Average stay of patient | 14.05 | 13.8 |
| **X-RAY DEPARTMENT** | | |
| Radiographs (films) | 65,625 | 82,153 |
| Radiographs (examinations) | 25,720 | 30,036 |
| Fluoroscopies | 3,292 | 3,607 |
| X-Ray Treatments | 2,770 | 2,867 |
| **LABORATORY DEPARTMENT:** | | |
| Examinations | 196,952 | 215,718 |
| B. M. R.'s | 4,130 | 4,771 |
| E. C. G.'s | 738 | 757 |
| Total | 201,820 | 221,246 |
| **OPERATIONS:** | | |
| Total | 9,143 | 9,314 |
| Major | 3,396 | 3,294 |
| Minor | 3,332 | 3,326 |
| Genito-Urinary | 2,415 | 2,694 |
| **OUTPATIENT TREATMENTS** | | 76,197 |

Sun Deck, Rehabilitation Building

Service Unit, under construction



# MEDICAL STAFF

## Active Staff

### Indoor Appointments

## Department of Medicine

(Director—DOCTOR D. R. WILSON)

### Division of Internal Medicine

**D. R. WILSON,** B.A. (Oxford); M.D., C.M. (McGill); L.M.C.C.; F.R.C.P.(C); Spec. Cert. Int. Med. Alberta; F.A.C.P.

**D. M. BELL,** B.A., M.D. (Alberta); L.M.C.C.; Spec. Cert. Int. Med.; R.C.P.S.(C).

**G. I. BELL,** B.Sc., M.D. (Alberta); L.M.C.C.; F.A.C.P.; Spec. Cert. Int. Med.; R.C.P.S.(C) and Alberta.

**M. M. CANTOR,** B.Sc., M.D. (Manitoba); L.M.C.C.; F.A.C.P.; Spec. Cert. Int. Med. R.C.P.S.(C).

**E. F. DONALD,** M.D. (Alberta); L.M.C.C.; Spec. Cert. Int. Med. R.C.P.S.(C) and Alberta.

**J. DVORKIN,** M.D. (Alberta); L.M.C.C.; Spec. Cert. Int. Med. R.C.P.S.(C) and Alberta.

**J. F. ELLIOTT,** B.A., M.D. (Alberta); L.M.C.C.; F.R.C.P.(C); Spec. Cert. Int. Med. R.C.P.S.(C) and Alberta; F.A.C.P.

**R. S. FRASER,** B.Sc., M.D. (Alberta); L.M.C.C.; M.Sc. (Bio); F.R.C.P.(C).

**J. A. L. GILBERT,** M.B., Ch.B., M.D., F.R.C.P. (Edinburgh); M.R.C.P. (London); F.R.C.P.(C); Spec. Cert. Int. Med. R.C.P.S.(C).

**S. E. GREENHILL,** M.D. (Toronto); L.M.C.C.; D.P.H.; Spec. Cert. Int. Med. R.C.P.S.(C).

**K. A. HAMILTON,** B.A. (Toronto); B.A., B.M., B.Ch. (Oxford); M.R.C.P. (London); F.R.C.P.(C); Spec. Cert. Int. Med. and Psych. (Alberta); F.A.C.P.

**E. G. KIDD,** B.Sc., M.D. (Alberta); L.M.C.C.; Spec. Cert. Int. Med. R.C.P.S.(C).

**A. S. LITTLE,** M.D. (Manitoba); L.M.C.C.; F.R.C.P.(C).

**L. E. McLEOD,** B.Sc., M.D. (Alberta); M.Sc. (McGill).

**G. MONCKTON,** M.B., B.S.; M.R.C.S.; L.R.C.P.; M.D. (London); M.R.C.P. (London).

**F. B. RODMAN,** B.Sc., Pharm.; B.Sc., Ph.D. (Minnesota); M.D. (Alberta); L.M.C.C.; Spec. Cert. Int. Med. R.C.P.S.(C).

**J. W. SCOTT,** M.D., C.M. (McGill); F.R.C.P.(C); L.M.C.C.; Spec. Cert. Int. Med. R.C.P.S.(C); F.A.C.P.

**S. M. SCOTT,** M.D. (Manitoba).

**P. H. SPRAGUE,** M.D. (Alberta); M.S. (Minnesota); L.M.C.C.; F.A.C.P.; Spec. Cert. Int. Med. R.C.P.S.(C) and Alberta; Dipl. Amer. Bd. Int. Med.

**R. K. THOMSON,** B.Sc., M.D. (Alberta); L.M.C.C.; Spec. Cert. Int. Med. R.C.P.S.(C) and Alberta; F.A.C.P.

### Division of Dermatology

**P. L. RENTIERS,** B.A., M.D. (Alberta); L.M.C.C.; M.S. (Minnesota); Spec. Cert. Derm. and Syph. R.C.P.S.(C).

## Department of Surgery

(Director—DOCTOR W. C. MacKENZIE)

### Division of General Surgery

**W. C. MacKENZIE,** B.Sc., M.D., C.M. (Dalhousie); L.M.C.C.; F.R.C.S.(C); F.A.C.S.; Spec. Cert. Gen. Surg. R.C.P.S.(C) and Alberta; Dipl. Amer. Bd. Surg.

**R. L. ANDERSON, M.D.** (Alberta); L.M.C.C.; F.R.C.S.(C); Spec. Cert. Gen. Surg. R.C.P.S.(C) and Alberta; F.A.C.S.

**J. C. CALLAGHAN,** M.D., B.S., M.S. (Toronto); L.M.C.C.; F.R.C.S.(C); F.A.C.S.

**R C. HARRISON,** M.D. (Alberta); L.M.C.C.; M.S.; F.R.C.S.(C); Dipl. Amer. Bd. Surg.; Spec. Cert. Gen. Surg. R.C.P.S.(C) and Alberta; F.A.C.S.

**R. J. JOHNSTON,** B.S., M.D. (Alberta); L.M.C.C.; F.R.C.S.(C); Spec. Cert. Gen. Surg.; F.A.C.S.; Dipl. Amer. Bd. Surg.

**R. A. MacBETH,** B.A., M.D. (Alberta); L.M.C.C.; M.Sc. Surg. (McGill); F.R.C.S.(C); Spec. Cert. Gen. Surg. R.C.P.S.(C).

**A. B. McCARTEN,** M.D. (Manitoba); L.M.C.C.; F.R.C.S. (England); F.R.C.S.(C); Spec. Cert. Surg. R.C.P.S.(C) and Alberta.

**H. MELTZER,** M.D. (Manitoba); L.M.C.C.; Founding Member Amer. Bd. Thor. Surg.; Cert. Thor. Surg. R.C.P.S.(C) and Alberta.

**B. MICHALYSHYN,** M.D. (Alberta); L.M.C.C.; F.R.C.S.(C); Spec. Cert. Surg. R.C.P.S.(C) and Alberta; F.A.C.S.

**C. A. ROSS,** M.D. (Alberta); L.M.C.C.; F.R.C.S.(C); F.A.C.C.P.; Cert. Thor. Surg. R.C.P.S.(C); F.A.C.S.

**G. L. WILLOX,** M.D. (Alberta); L.M.C.C.; F.R.C.S.(C); Spec. Cert. Gen. Surg. R.C.P.S.(C) and Alberta; F.A.C.S.

**T. S. WILSON,** B.Sc. (New Brunswick); M.D. (Toronto); L.M.C.C.; F.R.C.S.(C); Spec. Cert. Gen. Surg. R.C.P.S.(C) and Alberta.

### Division of Genito-Urologic Surgery

**J. O. METCALFE,** B.S., M.D. (Alberta); L.M.C.C.; F.R.C.S.(C); Spec. Cert. Urol. R.C.P.S.(C) and Alberta; F.A.C.S.

**G. N. ELLIS,** B.A., M.D., C.M. (Queen's); L.M.C.C.; Spec. Cert. Urol. R.C.P.S.(C) and Alberta; F.A.C.S.

**R. R. FRANCIS,** B.A., M.D. (Alberta); F.R.C.S.(C); F.A.C.S.; Spec. Cert. Urol. R.C.P.S.(C) and Alberta.

**G. N. TUCKER,** M.D. (Toronto); L.M.C.C.; Spec. Cert. Urol. R.C.P.S.(C) and Alberta.

### Division of Neurosurgery

**G. K. MORTON,** M.D. (Alberta); L.M.C.C.; Spec. Cert. Neurosurg. R.C.P.S.(C).

**T. J. SPEAKMAN,** M.D. (Manitoba); L.M.C.C.; M.Sc. (McGill); F.R.C.S.(C); Spec. Cert. Neurosurg. R.C.P.S.(C).

### Division of Orthopaedic Surgery

**O. ROSTRUP,** M.D. (Alberta); L.M.C.C.; Dipl. Amer. Bd. Ortho. Surg.; Spec. Cert. Ortho. Surg. R.C.P.S.(C) and Alberta; F.R.C.S.(C); F.A.C.S.

**G. W. CAMERON,** B.A., M.D., C.M. (McGill); F.R.C.S.(C); F.A.C.S.

**R. G. HUCKELL,** M.D., C.M. (McGill); L.M.C.C.; Dipl. Amer. Bd. Ortho. Surg.; Spec. Cert. Ortho. Surg. R.C.P.S.(C) and Alberta; F.A.C.S.; F.I.C.S.; F.A.A.O.S.

**D. C. JOHNSTON,** M.D. (Alberta); L.M.C.C.; Spec. Cert. Ortho. Surg. R.C.P.S.(C) and Alberta; Dipl. Amer. Bd. Ortho. Surg.; F.R.C.S.(C).

**G. L. WILSON,** M.D. (Alberta); L.M.C.C.; Spec. Cert. Ortho. Surg. R.C.P.S.(C) and Alberta.

### Division of Plastic Surgery

**E. HITCHIN,** M.D. (Alberta); L.M.C.C.; Spec. Cert. Gen. Surg. R.C.P.S.(C) and Alberta.

## Department of Obstetrics and Gynaecology

(Director—DOCTOR J. R. VANT)

**J. R. VANT,** B.A. (Saskatchewan); M.D. (Manitoba); L.M.C.C.; Spec. Cert. Obs. & Gyn. R.C.P.S.(C); F.R.C.O.G.; F.A.C.S.; F.R.C.S.(C).

**D. M. BELL,** M.D. (Alberta); F.R.C.S.(C); L.M.C.C.; Spec. Cert. Obs. & Gyn. Alberta; F.A.C.S.

**J. BUGIS,** B.A., M.D. (Alberta); L.M.C.C.; Spec. Cert. Obs. & Gyn. R.C.P.S.(C) and Alberta.

**T. R. CLARKE,** M.D. (Alberta); L.M.C.C.; M.R.C.O.G.; Spec. Cert. Obs. & Gyn. R.C.P.S.(C).

**A. DAY,** M.B. (Toronto); L.M.C.C.; Spec. Cert. Obs. & Gyn. R.C.P.S.(C) and Alberta.

**W. D. FREW,** M.B., Ch.B. (Edinburgh); F.R.C.S.(C); F.A.C.S.; Spec. Cert. Obs. & Gyn. R.C.P.S.(C); D.R.C.O.G

**R. H. HORNER,** M.D. (Alberta); L.M.C.C.; M.R.C.O.G.; F.A.C.S.; Dipl. Amer. Bd. Obs. & Gyn.; Spec. Cert. Obs. & Gyn. R.C.P.S.(C) and Alberta.

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**T. R. NELSON,** M.B., Ch.B. (Edinburgh); M.R.C.O.G.; F.R.C.S.(C).

**S. S. PARLEE,** B.Sc., M.D. (Alberta); L.M.C.C.; M.R.C.O.G.; F.A.C.S.; Spec. Cert. Obs. & Gyn. Alberta; Dipl. Amer. Bd. Obs. & Gyn.

**E. B. QUEHL,** M.D. (Alberta); L.M.C.C. D.R.C.O.G.; M.R.C.O.G. (London); Spec. Cert. Obs. & Gyn. R.C.P.S.(C).

**D. C. RITCHIE,** B.Sc., M.D. (Alberta); L.M.C.C.; Dipl. Amer. Bd. Obs. & Gyn.; Spec. Cert. Obs. & Gyn. R.C.P.S.(C); F.A.C.S.

**Y. YONEDA, M.D.** (Alberta); L.M.C.C.; F.R.C.S.(C); Spec. Cert. Obs. & Gyn. R.C.P.S.(C) and Alberta; F.A.C.S.

## Department of Ophthalmology and Otorhinolaryngology

(Director—DOCTOR M. R. MARSHALL)

### Division of Ophthalmology

**M. R. MARSHALL,** M.D., C.M. (McGill); L.M.C.C.; D.L.O. (England); Spec. Cert. O. & R.O.L.; Spec. Cert. Ophthl. R.C.P.S.(C) and Alberta; F.R.C.S.(C); F.A.C.S.

**J. W. DUGGAN,** M.D. (Alberta); L.M.C.C.; M.M.S. (Tulane); Dipl. Amer. Bd. Ophth; Spec. Cert. Ophthl. R.C.P.S.(C) and Alberta; F.R.C.S.(C); F.A.C.S.

**R. W. ROBERTSON,** B.Sc., M.D. (Alberta); Spec. Cert. Ophthl. R.C.P.S.(C).

### Division of Otorhinolaryngology

**W. S. S. ARMSTRONG,** M.D., C.M. (McGill); L.M.C.C.; Spec. Cert. O. & R.O.L. R.C.P.S.(C).

**K. A. C. CLARKE,** M.C., B.Sc., M.D. (Alberta); L.M.C.C.; Spec. Cert. R.O.L. R.C.P.S.(C); Dipl. Amer. Bd. R.O.L.

**T. C. WILSON,** M.D., C.M. (Queen's); L.M.C.C.; Spec. Cert. R.O.L. R.C.P.S.(C); Dipl. Amer. Bd. R.O.L.

## Department of Paediatrics

(Director—DOCTOR J. K. MARTIN)

**J. K. MARTIN,** M.R.C.S.; L.R.C.P.; M.B.; B.S. (London); D.C.H.; D.(Obst.) R.C.O.G.; M.R.C.P.

**H. B. ARMSTRONG,** M.D. (Alberta); L.M.C.C.; Spec. Cert. Paed. R.C.P.S.(C) and Alberta.

**L. E. BEAUCHAMP,** B.Sc., M.D. (Alberta); L.M.C.C.; Spec. Cert. Paed. R.C.P.S.(C) and Alberta.

**J. CALDER,** M. D. (Alberta); L.M.C.C.; Spec. Cert. Paed. R.C.P.S.(C) and Alberta.

**N. F. DUNCAN,** B.Sc., M.D. (Alberta); L.M.C.C.; Spec. Cert. Paed. R.C.P.S.(C) and Alberta; F.A.A.P.

**T. A. GANDER,** M.B.E.; M.D. (Alberta); L.M.C.C.; F.A.A.P.

**L. C. GRISDALE,** B.Sc., M.D. (Alberta); L.M.C.C.; Spec. Cert. Paed. R.C.P.S.(C) and Alberta.

**K. A. SWALLOW,** B.Sc., M.D. (Alberta); L.M.C.C.; Spec. Cert. Paed. R.C.P.S.(C) and Alberta.

## Department of Psychiatry

(Director—DOCTOR K. A. YONGE)

**K. A. YONGE,** M.D., C.M. (McGill); L.M.C.C., D.P.M. (London); Spec. Cert. Psy. R.C.P.S.(C).

**G. D. CARSON,** M.D. (Alberta); L.M.C.C.; Spec. Cert. Psy. Alberta.

**S. S. SPANER,** B.A., M.D. (Alberta); L.M.C.C.; Spec. Cert. Psy. Alberta.

## Department of Rehabilitation

(Director—DR. M. T. F. CARPENDALE)

**M. T. F. CARPENDALE,** M.R.C.S. (London); L.R.C.P. (England); M.S. (Minnesota).

**M. C. ADAMSON,** M.D. (Manitoba).

# MEDICAL STAFF

## Department of Anaesthesiology

(Director—DOCTOR E. A. GAIN)

**E. A. GAIN,** B.A., M.D. (Alberta); L.M.C.C.; Spec. Cert. Anaes. R.C.P.S.(C) and Alberta; Dipl. Amer. Bd. Anaes.; F.A.C.A.

**D. F. CAMERON,** M.B.E.; M.I.D.; B.A., M.D. (Alberta); L.M.C.C.; Spec. Cert. Anaes. R.C.P.S.(C) and Alberta.

**C. D. ELTON,** M.R.C.S.; L.R.C.P.; D.A. (London).

**W. D. KYLE,** B.Sc., M.D. (Alberta); L.M.C.C.

**R. G. McCALLA,** B.Sc., M.D. (Alberta).

**J. W. R. McINTYRE,** M.R.C.S.; L.R.C.P.; F.F.A.R.C.S.; D.A.

**G. T. MOONIE,** B.A. (Saskatchewan); M.D. (Alberta); L.M.C.C.; F.A.C.A.; Spec. Cert. Anaes. R.C.P.S.(C) and Alberta; Dipl. Amer. Bd. Anaes.

**S. G. PALETZ,** L.R.C.P. & S.E.; L.R.F.P. & S.G.

## Department of Radiology

(Director—DOCTOR H. E. DUGGAN)

**H. E. DUGGAN,** M.D. (Alberta); L.M.C.C.; F.A.C.R.; Spec. Cert. Diag. & Ther. Radiol. R.C.P.S.(C) and Alberta; Dipl. Amer. Bd. Diag. & Ther. Radiol.

**C. E. HOLMES,** B.A., M.D. (Alberta); L.M.C.C.; Spec. Cert. Diag. & Ther. Radiol. R.C.P.S.(C).

## Department of Pathology

(Director—DOCTOR J. W. MACGREGOR)

**J. W. MACGREGOR,** B.A., M.D. (Alberta); L.M.C.C.; Cert. Path. & Bact. R.C.P.S.(C); F.R.C.P.(C).

**J. H. STIRRAT,** B.Sc., M.B., Ch. B.; M.D. (Glasgow).

## Department of Clinical Laboratory Services

(Director—DOCTOR R. E. BELL)

**R. E. BELL,** M.D. (Alberta); L.M.C.C.; Cert. Amer. Bd. Clin. Path.; F.I.S.H.; Cert. Clin. Path. Alberta.

## Department of Dentistry

(Director—DOCTOR H. R. MacLEAN)

**H. R. MacLEAN,** D.D.S. (Alberta); F.A.C.D.; F.I.C.D.

**W. E. ADDINELL,** D.D.S. (Alberta).

**C. R. CASTALDI,** D.D.S.; M.S.D.

**S. D. FRASER,** D.D.S. (Alberta).

**W. S. HAMILTON,** L.D.S., D.D.S. (Toronto); F.A.C.S.; F.D.S., R.C.S. (England).

**J. D. HAWKINS,** D.D.S. (Alberta).

**K. A. McMURCHY,** D.D.S. (Alberta).

**R. S. VAN ALSTINE,** D.D.S. (Alberta); M.S. (Oral. Surg.) (Michigan).

## OUTDOOR APPOINTMENTS

### Department of Medicine

**G. D. BROWN,** B.Sc., M.D. (Alberta); L.M.C.C.; Spec. Cert. Int. Med. R.C.P.S.(C).

**A. CAIRNS,** M.D. (Alberta); L.M.C.C.; Spec. Cert. Int. Med. Alberta.

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E. Hitchin, M.D.

| | |
|---|---|
| 5 | DELIVERIES |
| 87 | X-RAY EXAMINATIONS |
| 269 | REHABILITATION TREATMEN |
| 57 | FIRST AID EMERGENCIES |
| 693 | PHARMACY SERVICES |
| 30,200 | CU. FT. OF WATER |
| 252,270 | LBS. OF STEAM |
| 18 | OPERATIONS |
| 1,100 EMPLOYEES<br>430 STUDENTS<br>164 MEDICAL STAFF | TOTAL PERSONNEL 1694 |

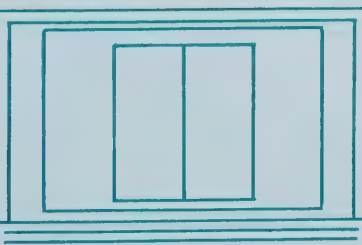
## A TYPICAL DAY IN THE HOSPITAL

AVERAGE DAILY OCCUPANCY — 753 PATIENTS

| | |
|---|---|
| PROVINCIAL LABORATORY TESTS | 232 |
| HOSPITAL LABORATORY TESTS | 622 |
| BLOOD TRANSFUSIONS | 15 |
| X-RAY FILMS | 205 |
| ANESTHETICS | 19 |
| MEALS SERVED<br>COST OF FOOD | 3408<br>$888.00 |
| ELECTRIC KW HOURS | 11,674 |
| CENTRAL SUPPLY SERVICES | 3022 |
| LBS. OF LAUNDRY PROCESSED | 10,742 |

## UNIVERSITY OF ALBERTA HOSPITAL

55
ADMISSIONS



55
DISCHARGES

205
OUT-PATIENT
TREATMENTS

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T. C. Eid, M.D. (Toronto)—Basic Sciences
J. Gort, M.D. (Alberta)—Basic Sciences
O. Retzer, M.D. (Alberta)—Basic Sciences
S. T. Norvell, M.D. (Illinois)—Teaching Fellow
H. G. T. Williams, M.D. (Liverpool)—Cardiac Surgery

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House Staff 1958-59

House Staff Residence

Nurses' Residences South East View

# NURSING

# SCHOOL OF NURSING

Dr. A. C. McGugan,

Superintendent,

University of Alberta Hospital

Sir:

I have pleasure in presenting herewith the Annual Report for the Department of Nursing covering the period April 1, 1957 to March 31, 1958.

In June of this year the Administrative offices of the Department moved to much enlarged quarters on the Second Floor of the 1951 addition to the Hospital. The central location, which we appreciate, has also permitted us to separate the Department more definitely into Nursing Service and Nursing Education. Thus the flow of work through the Department has been facilitated.

Both the graduate nurses and the students were represented at the Annual Meeting of the Alberta Association of Registered Nurses which was held in Banff during May. I have attended the meetings of the Committee on Legislation and Bylaws of the Canadian Nurses' Association held in Toronto and Miss Thompson, Associate Director of Nursing Education, attended the quadrennial meetings of the International Council of Nurses held in Rome.

Nursing Officer staff members have participated in the programmes of the Edmonton Chapter, A.A.R.N., the Annual Meeting of the A.A.R.N., the School for Diabetics, a Civil Defense Course for Nurses, the teaching programmes in the third year of Medicine and in the University School of Nursing. The nurses in the Operating Room participated in the color televised programme at the time of the meetings of the Canadian Medical Association.

We have enjoyed the enthusiasm and interest of a number of visitors from Canada, Great Britain and one from Egypt whom we have shown around the hospital. We are always happy to greet Alumnae who drop in on return visits to the city. Both sections of the 1947 graduating class included a visit to the Hospital in the activities of their ten year reunions during July.

*Nursing Officers*

There has been considerably less mobility in our senior Nursing staff this past year. We had no difficulty in filling the four vacancies that occurred during the summer months with well prepared applicants, three of whom were graduates of this School.

The Clinical Instructor-Supervisor in the Obstetrical Department was granted leave-of-absence in August to proceed on a study year at McGill University. The Nursery Supervisor was granted leave-of-absence in January in order to attend an eight-week course in the Care of Premature Infants held at the Royal Victoria Hospital in Montreal. Both these nurses received financial assistance under the Professional Training Grant, through the Provincial Department of Public Health.

Four new Nursing Officer positions have been created during this year as follows:

—during April, in anticipation of the move to enlarge Paediatric facilities, a Supervisor of the Infant and Pre-school section.

—during November, following the opening of the surgical units in the new wing, a second Clinical Instructor in Surgical Specialties.

—during February, in anticipation of the reopening of the former Paediatric Department, a Supervisor of the Chronic and Convalescent section.

—during February, with the completion of the opening of all sections of the Hospital, a fourth Administrative Supervisor on the afternoon tour of duty.

The growth of the Nursing Officer staff over the past five years is depicted in Table 1, under the heading of Nursing Service.

*Nursing Service*

This has been a very active year in the Nursing Service division. All the patient care areas in the new wing of the Hospital have been brought into use and certain sections in the older parts of the Hospital have been remodelled for other purposes. The changes which have taken place are as follows:

April 10— Nursing Unit 25, Eye, Ear, Nose and Throat, was transferred to Nursing Unit 57. The area occupied by Nursing Unit 25 went out of use as a patient care area and was remodelled for office purposes to accommodate the Personnel

Department, Medical Social Service, Maintenance Co-ordination and the Department of Nursing.

May 15—Nursing Unit 32, Respiratory Poliomyelitis, was transferred to Nursing Unit 67.

June 19— Nursing Unit 23, Infant and Pre-School Children, was transferred to Nursing Units 37 and 38 and Nursing Unit 24, children aged 5 - 14 years, was transferred to Nursing Unit 36.

September 25—Nursing Unit 46 was opened for Orthopaedic patients, with an emphasis on female patients.

October 9— Nursing Unit A & B, Male Orthopaedics, was transferred to Nursing Unit 47.

October 23 and February— Nursing Unit A & B, was reopened, a ward at a time, to accommodate veterans requiring domiciliary care.

November 13— Nursing Unit 56 was opened for Surgical cases, with the emphasis on thoracic and cardiac cases. The Cardiac Recovery Room, which had accommodation for One Patient on Nursing Unit 53, was transferred to this Unit with accommodation for three patients.

November 20— Nursing Unit 32 was reopened for male Medical patients.

January 16— Nursing Unit 66 was opened for patients of the Department of Rehabilitation Medicine. Accommodation for ill students is also provided on this Unit. This Unit has been temporarily opened during the Autumn as an infirmary for students with Asian influenza. It was also used early in January for a two-day Blood Donor Clinic for staff members.

February 26— Nursing Unit 24 was reopened for Chronic and Convalescent Children between the ages of five and fourteen.

This is the first year that we have been able to obtain graduate nurse staff with relative ease throughout the year. It has simplified our planning relative to opening the new wing. However it continues to be difficult to obtain adequate numbers of Certified Nursing Aides and to bridge this deficit of staff we have continued to employ part-time graduate nurses. We do not expect that this will be a continuing policy, for the new School for Nursing Aides in Edmonton which admitted its first class on February 3, should provide an ultimate solution, if it can recruit adequate numbers of students.

A comparative staff picture over a five year period is presented in Table One below. Mention should be made of increase in staff in two departments this past year, not directly associated with opening the new ring.

1. In Obstetrics, due to the increased volume of cases handled and our desire to set up a separate team of graduate nurses to work in the Premature Nursery, the following additions have been made:
   - Assistant Charge Nurse - 1
   - General Staff Nurses - 7
   - Ward Clerk - 1
   - Ward Aide - 1

TABLE I.

NURSING SERVICE— Comparative Staff Statistics as at March 31 over a five year period.

| Category | 1958 | 1957 | 1956 | 1955 | 1954 |
|---|---|---|---|---|---|
| Nursing Officers | 39 | 36 | 34 | 32 | 23 |
| Charge Nurses | 42 | 37 | 24 + 13 | 26 + 15 | 24 + 19 |
| Assistant Charge Nurses | 20 | 18 | 15 | 12 | 3 |
| General Staff Nurses: | | | | | |
| Full-time | 183 | 96 | 122 | 110 | 83 |
| Part-time | 19 | 21 | 16 | 1 | 20 |
| Certified Nursing Aides: | | | | | |
| Full-time | 45 | 47 | 50 | 48 | 29 |
| Part-time | 1 | — | 1 | — | — |
| Nursing Aide Trainees | 8 | 9 | 8 | 12 | 8 |
| O.R. Assistants | 6 + 4 | — | — | — | — |
| Ward Clerks | 23 | 15 | 14 | 14 | 14 |
| Ward Aides | 109 | 96 | 90 | 80 | 73 |
| Bed Complement | 1,113 | 912 | 912 | 910 | 900 |
| % Occupancy | 80.8 | 75.19* | 74.71* | 74.01* | 74.78* |

*% Occupancy for the fiscal year rather than on March 31.

We have been interested in following the ratio of University Hospital graduates to the total number of graduates employed. It will be noted in Table Two how this ratio has remained fairly constant in the overall picture, for a five year period, even though it has varied in particular categories within the group.

TABLE 2.

| | 1958 | | 1957 | | 1956 | | 1955 | | 1954 | |
|---|---|---|---|---|---|---|---|---|---|---|
| Category | No. | U.A.H. | No. | U.A.H. | No. | U.A.H. | No. | U.A.H. | No. | U.A.H. |
| Nursing Officers | 39 | 18 | 36 | 17 | 34 | 12 | 32 | 11 | 23 | 7 |
| Charge Nurses | 42 | 12 | 37 | 11+1* | 37 | 13 | 41 | 14 | 43 | 11+1* |
| Asst. Charge Nurses | 20 | 5 | 18 | 4 | 15 | 6 | 12 | 5 | 3 | 1 |
| General Staff: | | | | | | | | | | |
| Full-time | 183 | 58+2* | 96 | 28 | 122 | 35+1* | 110 | 37+1* | 83 | 30 |
| Part-time | 19 | 4 | 21 | 6 | 16 | 5 | 1+2 | 1 | 20 | 6 |
| TOTALS | 303 | 99 | 208 | 67 | 224 | 72 | 198 | 69 | 172 | 56 |
| * P.M.H. Affiliates | | | | | | | | | | |
| % Grads. —U.A.H. Grads. | 32.9 | | 32.2 | | 32.1 | | 34.9 | | 32.5 | |

2. In the Operating Room, to stabilize staff over the summer months particularly, a group of six Certified Nursing Aides were given a six-weeks in-service programme during October and November. A further group of four commenced a similar programme in March.

*Nursing Education*

During this year the Hospital Board appointed a Committee on Admissions of four members. This Committee was given authority to act on applications to the School of Nursing, with the understanding that the Committee would report back to the Board on applicants who were rejected. This has proven a satisfactory arrangement to the Committee and the procedure appears to be functioning smoothly.

The following classes have been registered this year:

on September 3— 85 members of whom twenty-three are in the degree pattern.

on January 13— 3 affiliates from the Provincial Mental Hospital, Ponoka.

on January 28— 34 members.

On June 14, twenty-nine of thirty-one members of Class January, 1960 were capped and on January 24, the Class of September, 1960 which by that time consisted of eighty-two members was capped.

There have been fourteen student withdrawals during the past year for the following reasons:

Marriage - 8

Health - 3 one of whom reregistered in the B.Sc. in Arts pattern with Medicine her goal.

Academic

Reasons - 2

Other - 1

14

The enrollment of the School has been growing gradually. Table Three gives a picture of our student enrollment as of March 31, for the past five years and also indicates the number of graduands and the number of withdrawals during the same periods.

The following changes in student clinical experience have become effective this year:

—during August, the period of experience in the Diet Kitchen was reduced from five weeks to four weeks. This was in line with an amendment to the University of Alberta Regulations Governing Schools of Nursing.

—during January, experience in caring for pati-

TABLE 3.

NURSING EDUCATION— Comparative Student Statistics over a five year period.

| Enrollment | | | | | | |
|---|---|---|---|---|---|---|
| Date | U.A.H. Students | P.M.H. Affiliates | Lamont Affiliates | Total Students | No.* Graduated | No.* Discontinued |
| March 31, 1958 | 320 | 5 | 3 | 328 | 91+2† | 14 |
| March 31, 1957 | 298 | 8 | 2 | 308 | 93+4† | 18 |
| March 31, 1956 | 278 | 7 | 2 | 287 | 73+3† | 17 |
| March 31, 1955 | 279 | 8 | Programme commenced Sept. 1955 | 287 | 74+3† | 13 |
| March 31, 1954 | 255 | 7 | | 262 | 59+2† | 7 |

* Figures pertain to fiscal year ending at date noted.

† P.M.H. Affiliates.

ents in the Department of Rehabilitation Medicine was incorporated into the four week period spent in the Respiratory Poliomyelitis Unit.

—during February, the period of experience in the Operating Room was reduced from twelve weeks to nine weeks, in keeping with current trends. The minimum requirement in this Department at present is eight weeks.

We are anxious to increase the block of experience in Psychiatric Nursing, which at present is four weeks, just as soon as added clinical facilities become available.

This is the one service where our length of experience does not meet the requirements for registration in a number of States in the United States.

The students have had a varied round of extra-curricular activities, including participation in a number of University functions and sports. The most noteworthy would be the tea held during April in honor of Miss Agnes Macleod, the Choir participation in the Nurses' Annual Church Service and the Rotary Carol Festival, the Open House at Varsity Guest Weekend and the Nurses' Novelty Nite sponsored by the Student Nurses' Association of Alberta and held in our Auditorium.

We are also happy to announce that one of ~~our~~ intermediate students received Second Prize in the Macmillan Case Study Competition, open to all student nurses in Canada. This is the fourth year of the competition and also the fourth year in which we have had an award winner from our student body.

It is perhaps of interest to comment on an apparent trend in our senior class. Seven have been granted permission to complete their programme as married students. Also, over half our withdrawals this year were students who wished to marry and who were not far enough along in their Courses to attempt both matrimony and completion of their programmes.

Fourteen graduates wrote registered nurses' examinations in April and one candidate failed one paper. Seventy-eight of our graduates and two of our Ponoka affiliates wrote registered nurses' examinations in September. We regret to report that one candidate failed in one paper, one candidate failed in two papers and one candidate failed three papers. In three of these four failures, marriage or impending marriage could have been a contributing factor to their failure to reach a passing level of performance.

We have again enjoyed the stimulation of having University field work students with us. During May we provided terminal field work for two students from the University of Saskatchewan and three students from the University of Alberta progammes in Teaching and Supervision. For one day a week during the period of January to March we had six such students from the programme at the University of Alberta for concurrent field work.

## NURSING ADVISORY BOARD

The full committee has met twice during the past year and the Executive has held five meetings.

The major activity has been the wording of the diploma which, according to our contract with the University of Alberta, is to be awarded jointly by the University and the Hospital, commencing in 1958.

The Board accepted the kind offer of Dr. Margaret Hutton to award twice a year a money prize, known as the Meta M. Hodge Memorial Prize, to an intermediate student for outstanding merit in the practice of nursing. The prize was awarded for the first time at the June Capping Exercises and the recipient was our first male student, Mr. Ralph Coombs.

## THE NURSES' RESIDENCE

From the middle of May until the end of June, it was necessary to transfer the Teaching Department from the Residence to Nursing Unit 32 to allow the contractors to join the old and new sections of the Teaching Department and to do some necessary alterations in the original section. We moved back to the new facilities before the vacation season but throughout the Summer construction continued. We were able to use all the facilities when the new class enrolled in September but minor alterations have continued throughout the year. The library will not likely be ready to function in its new quarters until May or June of 1958. The new facilities are greatly appreciated.

During June, the top floor of the residence wing was occupied and by the end of August the entire new residence wing was completed. When the graduating September class completed their programme, the fourth floor of the new wing in the Hospital ceased to serve for residence quarters after two years of being used for this purpose.

During the middle of September, Mrs. Jean Kelman retired as Residence Supervisor. She has been ably replaced by Mrs. Clara Kirk.

There have been many improvements in the residence facilities. The addition of individual mailboxes for students has relieved the congestion in the Main Entrance. The paving of the parking lot, installation of street lights between the hospital and residence, provision of a traffic light at our 114 Street crossing and a sidewalk between 87 and 84 Avenues on 114 Street are the most noteable improvements.

In reviewing the activities over the past year, we are aware of and grateful for the progress that has been accomplished. There has been a marked expansion in all areas.

We would like to express our appreciation for the co-operation that has been enjoyed with the staffs of other departments. On behalf of the teaching staff and students we would like to say a hearty thank you to the Medical Staff and others who have participated in our educational programme. We are particularly cognizant of the support and sympathetic consideration which we have received from the Administration and members of the Hospital Board.

All of which is respectfully submitted.

JEANIE S. CLARK
*Director of Nursing*

Music Room

Demonstration

Assembly Line

Menu Planning

# DIETARY DEPARTMENT

Dr. A. C. McGugan,
Medical Superintendent,
University of Alberta Hospital

Sir:

I am pleased to present a report for the year ending March 31, 1958 covering the work of the Dietary Department.

There were three major changes made in the food service—

1. The new cafeteria opened on April 3rd, 1957. All staff excepting students, now pay cash for meals. This change is reflected in a smaller number of meals served to staff this year.

2. During July and August, Mealpack service was introduced throughout the main part of the Hospital, resulting in warmer meals for the patients.

3. In November the use of a selective menu previously given only to Private and Semi Private patients, was extended to the public patients. There is considerably more office work required but it is an innovation appreciated by patients and in the long run will cut down on food wastage.

During the year the following staff resigned— Mrs. Edith Hughes, Miss Josephine Penman, Miss Mary Sneath, Miss Diane Dakin. New staff members are— Miss Dolores Oulton, Miss J. Pappas, Miss E. Stern.

A teaching appointment for the year 1957-58 was given to Mrs. K. Davidson.

There are two Dietetic Internes this year, both from the University of Alberta. A great deal of effort and time is being devoted to the strengthening of the course offered, in line with the other courses offered at the University of Alberta Hospital.

The present Dietary staff consists of the Director and six staff Dietitians. There are also spread through the Cafeteria, Main Kitchen, the Mewburn Pavilion and Servery—

1 Chef
14 Cooks
8 Food Supervisors
18 Food Assistants
75 other Staff

Basically the work done by a dietitian falls into three categories—

(1) Therapeutic.
(2) Educational.
(3) Administrative.

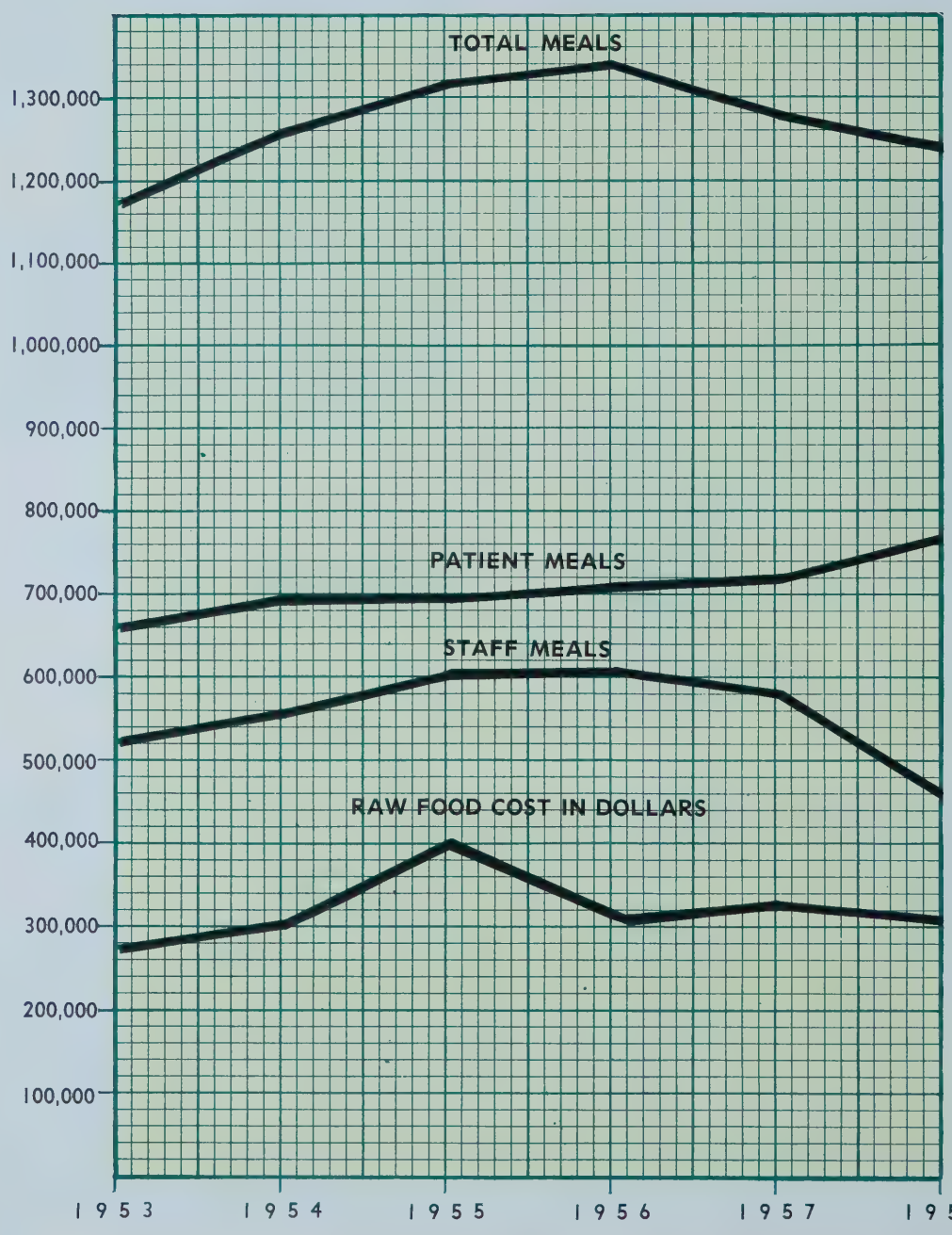
With the growth of the Hospital, the Administrative part of the work required an ever increasing amount of our time. During this year a new position was created under the Business Administrator and Mr. G. Smiley in this capacity, devotes his time to the Administration of the Dietary Department.

The meal count figures and food costs follow. There is a drop in staff meal total. The patient total shows an increase of 80,000 over the previous year, and all indications point to a continuing increase in the future.

Respectfully submitted
MARGARET G. LANG
*Director of Dietetics.*

| | 1952-1953 | 1953-1954 | 1954-1955 | 1955-1956 | 1956-1957 | 1957-1958 |
|---|---|---|---|---|---|---|
| MEAL COUNT | | | | | | |
| Staff: | 536,251 | 559,698 | 605,889 | 605,859 | 588,022 | 470,343 |
| Patients: | | | | | | |
| Full Diet | 397,932 | 401,637 | 376,710 | 391,312 | 386,732 | 483,936 |
| Special & Private | 265,650 | 294,895 | 319,061 | 311,516 | 316,515 | 299,509 |
| Total | 663,582 | 696,532 | 695,771 | 702,828 | 703,247 | 773,445 |
| Total Meals | 1,199,833 | 1,256,230 | 1,301,660 | 1,308,687 | 1,291,269 | 1,243,788 |
| RAW FOOD COST | $295,327.92 | 305,580.55 | 351,810.07 | 310,894.46 | 314,209.00 | 312,773.65 |
| AVERAGE COST PER MEAL | 24.86 | 24.03 | 24.38 | 22.82 | 23.35 | 25.14 |
| AVERAGE PRICES— BASIC FOODS: | | | | | | |
| Meat lb. | 35.40 | 34.40 | 34.72 | 34.16 | 32.91 | 38.03 |
| Turkey lb. | 40.52 | 37.54 | 42.45 | 35.11 | 42.29 | 35.77 |
| Butter lb. | 59.02 | 59.37 | 57.21 | 38.32 | 38.71 | 53.69 |
| Eggs doz. | 44.83 | 49.27 | 40.39 | 45.23 | 43.78 | 36.47 |
| Potatoes bushel | 132.60 | 130.45 | 164.20 | 144.23 | 148.94 | 112.71 |

# UNIVERSITY OF ALBERTA HOSPITAL



Medical Building—University of Alberta

# MEDICINE

# DEPARTMENT OF MEDICINE

Dr. A. C. McGugan,

Superintendent,

University of Alberta Hospital.

Sir:

The past year has again been a period of expansion as far as the Department of Medicine is concerned.

With the increasing demands on special service units, it has been necessary to increase both the professional and technical staff in these areas. Dr. R. E. Rossall has joined Cardiovascular unit, and Dr. L. E. McLeod has been added to the staff in the area of Metabolism and Endocrinology. The welcome addition of these men has been made possible through the Special Services Fund.

The Department was pleased to note the successful appointment of Dr. L. E. McLeod as a new Markle Scholar. This appointment will provide Dr. McLeod with $30,000 spread over a five year period for the further development of clinical investigation in endocrinology and metabolism. This grant, combined with the National Research Council grant for a period of three years to develop a Metabolic Unit, should assure further expansion in this area of the Department.

During the past year Dr. J. A. L. Gilbert has joined the full time staff of the University and his appointment will be of great assistance to the department.

During the past year Dr. George Monckton has been added to the staff to develop the field of neurology. It is gratifying to note that a substantial grant from the Muscular Dystrophy Association of Canada has been made available to Dr. Monckton to develop diagnostic and research facilities in the field of neuromuscular disorders.

In keeping with the policy concerning short courses for practitioners throughout the Province, the Department of Medicine during the past year put on one short course in Endocrinology and Metabolism, and contributed speakers to the Annual Refresher Course.

The Medical Out-Patient Department continues to expand. During the past year an additional clinic has been established in the Out-Patient Department with the creation of a separate day devoted to the care of neurological patients.

As in previous years, the Out-Patient Department has continued to be used for the teaching of fourth year medical students.

During the past year D. W. E. Beamish and Dr. R. H. Dougall have completed a year of training in clinical investigation. Both of these Fellows were supported by funds made available through the Special Services Grant.

Attached to this report, you will find a list of National Research Council grants and the grant of the Muscular Dystrophy Association, together with a separate listing of publications, addresses and papers published by members of the department.

In conclusion, I would like to express my appreciation for the continued good relations which exist between the professional and administrative staff, which has made possible the continued expansion of services within this hospital.

Respectfully submitted,

D. R. Wilson, M.D.
*Professor of Medicine*

Dr. A. C. McGugan,

Superintendent,

University of Alberta Hospital.

Sir:

At your request I am listing for your information the National Research Council grants made to the members of the attending staff of this hospital for the year 1958-59.

(1) Dr. J. Dvorkin and Dr. R. S. Fraser— "Investigation of the Low Potential Electrocardiogram in Myxedema and Tissue Electrolyte Studies of Cardiac Muscle"— $2,500.00.

(2) Dr. R. C. Harrison— "The Role of the Gastric Antrum in the Control of Gastric Acid Secretion" —$7,500.00 annually for three years— total $22,500.00.

(3) Dr. S. Kling— "The Experimental Production of Portal Hypertension and Ascites" —$3,500.00.

(4) Dr. K. Kowalewski— "The Effect of Certain Catabolic and Anabolic Hormones on S35 Uptake in Growing Cartilage and Bone of Cockerels"— $2,000.00.

(5) Dr. J. O. Metcalfe— "Investigation of the Factors Related to Anemia Associated with Uremia and Renal Disease"— $2,500.00.

(6) Dr. B. Michalyshyn and Dr. G. L. Willox— "Effect of Various Stimuli on the Secretion of Mucus in Duodenal Dog Pouches"— $1,000.00.

(7) Dr. R. E. Rossall— "Combined Pathologic and Radiologic Studies of the Interstitial and Vascular Changes in the Lungs of Patients with Heart Disease"— $2,300.00.

(8) Dr. D. R. Wilson and Dr. L. E. McLeod—"Adrenocortical Function in Diabetes Mellitus", and Dr. D. R. Wilson and Dr. K. Kowalewski—"ACTH Activity of Human Blood"—$7,000.00.

(9) Dr. D. R. Wilson—"To Establish a Metabolic Unit in the University of Alberta Hospital"— $9,000.00 annually for three years—total $27,000.00.

The total National Research Council funds allocated to the staff of this hospital for the year 1958-59, and in two instances for three years, is $70,300.00.

In addition to this the sum of $18,400 was granted to Dr. Geo. Monckton by the Muscular Dystrophy Association of Canada to develop diagnostic and research facilities in the field of neuromuscular disorders.

Sincerely yours,

D. R. Wilson, M.D.,

*Professor of Medicine*

## GENERAL

March 1, 1957 - Feb. 28, 1958

ADDRESSES:

1. Whiting, R. W.: "Thalassemia Minor". Regional Meeting American College of Physicians, February 1, 1958. Banff.
2. Monckton, G.: "Sodium Retention and Periodic Paralysis". Regional Meeting American College of Physicians, February 1, 1958. Banff.
3. Monckton, G.: "The Incidence of Intracranial Bruits in Health". Regional Meeting National Research Council, February 1, 1958. Banff.
4. Edwards, Allan: "Hypertensive Cardiovascular Disease". Vegreville and District Medical Association, September, 1957.
5. Kidd, E. G.: "Recent Advances in the Knowledge and Treatment of Gout". Canadian Medical Association, June 21, 1957. Edmonton.
6. Elliott, J. F., Cairns, A., Sereda, M.: "Progress in Medicine". General Practitioners' Course, January, 1958.
7. Rentiers, P.: "Infantile Eczema and Allergic Skin Conditions". Westlock Medical Society, November, 1957.
8. Donald, E. F.: "What is Allergy". Vegreville Medical Society, September, 1957.
9. Little, A.: "Erythropoietin and Studies in Hemolytic Anemia". Red Deer, January, 1958.

PUBLICATIONS:

1. Triantaphyllopoulos, D. C.: "Studies on a Case of Thrombocytopathy: Experimental Findings on the Nature of the Platelet Defect." Canadian Medical Association Journal. 77:122-125, 1957.
2. Triantaphyllopoulos, D. C.: "The Anticoagulant Effect of Incubated Fibrinogen". Canadian Journal of Physiology and Biochemistry (in press).

RESEARCH:

1. Triantaphyllopoulos, D. C.: "The Anticoagulant Effect of Incubated Fibrinogen". National Research Council Grant (Metabolism, Items 3 and 4).

## DIVISION OF METABOLISM

March 1, 1957 - February 28, 1958

ADDRESSES:

1. Anderson, J. R. and Wilson, D. R.: "Adrenal Cortical Studies in Diabetes Mellitus". The Royal College of Physicians and Surgeons of Canada, October 18, 1957. Montreal; also Saskatchewan Academy of Medicine, Moose Jaw, October 8, 1957.
2. McLeod, L. E.: "Experiences in the Use of the 4—$I^{131}$ Antipyrene Space in Humans". Northwest Society for Clinical Research, January 11, 1958.
3. Gilbert, J. A. L.: "Clinical Findings of Importance in Endocrinology". Canadian Medical Association, June 20, 1957. Edmonton.
4. Wilson, D. R. and Cairns, A. (panel discussion): "Diagnostic Methods and Treatment of Thyrotoxicosis with Radioactive Iodine". Canadian Medical Association, June 18, 1957. Edmonton.
5. Gilbert, J. A. L.: "The Use of the Oral Insulin Substitutes". Canadian Diabetes Association, June 18, 1957. Edmonton.
6. Gilbert, J. A. L.: "The Use of the Oral Insulin Substitutes". Alberta Division, Canadian Medical Association, October 5, 1957. Red Deer.
7. Gilbert, J. A. L.: "The Use of the Oral Insulin Substitutes". Manitoba Division, Canadian Medical Association, October 17, 1957. Winnipeg.
8. Gilbert, J. A. L.: "The Use of the Oral Insulin Substitutes". British Columbia Division, Canadian Medical Association, September, 1957. Vancouver.
9. Wilson, D. R.: "Management of Thyroid Conditions". Brit'sh Columbia Division, Canadian Medical Association, September, 1957. Vancouver.
10. Gilbert, J. A. L.: "Pre-Diabetic Syndromes". Manitoba Division, Canadian Medical Association, October, 1957. Winnipeg.
11. Gilbert, J. A. L. (panel discussion): "Gastrectomy". Canadian Medical Association, June, 1957.

PUBLICATIONS:

1. Gilbert, J. A. L.: "The Use of Oral Insulin Substitutes". Alberta Medical Bulletin (in press).
2. Gilbert, J. A. L.: "The Use of Oral Insulin Substitutes". Manitoba Medical Review (in press).
3. Wilson, D. R.: "The Diagnosis and Treatment of Hyperthyroidism". Postgraduate Medicine, 22:74-79, 1957.

GRANTS AND RESEARCH IN PROGRESS:

1. Gilbert, J. A. L.: "Assessment of Aristocort". Lederle Company—$1,000.00.
2. Gilbert, J. A. L.: "Assessment of Incidence of Malignancy in Diabetes". Committee for Allocation of Funds for Medical Research—$1,500.00.
3. Wilson, D. R.: "Serum ACTH in Disease States". National Research Council Grant, 1957-58.
4. Wilson, D. R.: "Adrenocortical Factors in Diabetes Mellitus". National Research Council Grant, 1957-58. General Medicine, Item 1, and Metabolism, Items 3 and 4—$8,000.00.

## CARDIOVASCULAR UNIT

March 1, 1957 - Feb. 28, 1958

ADDRESSES:

1. Rich, C. B.: "The Q1 Interval in Metral Stenosis". Canadian Heart Association, June 18, 1957. Edmonton.
2. Dvorkin, J., and Fraser, R. S.: "The Medical Aspects of Open Heart Surgery". Canadian Heart Association, June 18, 1957. Edmonton.
3. Fraser, R. S., and Dvorkin, J.: "The Medical Aspects of Open Heart Surgery". The Royal College of Physicians and Surgeons of Canada, October 18, 1957. Montreal.
4. Beamish, W. E., and Fraser, R. S.: "The Seasonal Incidence of Congenital Heart Disease in Alberta". Northwest Society for Clinical Research, January 11, 1958. Vancouver.
5. Beamish, W. E.: "Patients with Congenital Heart Disease: Seasonal Incidence of Births in the Province of Alberta". Regional Meeting of the American College of Physicians, February 1, 1958. Banff.
6. Rossall, R. E.: "Regional Variations in the Pathological Changes in the Lungs in Mitral Stenosis". Western Regional Meeting National Research Council, January 31, 1958. Banff.
7. Fraser, R. S., and Dvorkin, J.: "Left Atrial Pressures and Mitral Stenosis". Clinical Investigation Travel Club, October 17, 1957. Montreal.

PUBLICATIONS:

1. Wilde, Henry: "Functional Electrocardiographic Abnormalities." New England Journal of Medicine (in print).
2. Rich, C. B.; and Wilde, Henry: "The Delayed First Heart Sound in Mitral Stenosis". (Submitted for publication.)
3. Shnitka, T., and Wilde, Henry: "Congenital Absence of the Spleen and Associated Cardiovascular Anomalies (The Martin-Gasser Syndrome)". (Submitted for publication.)
4. Fraser, R. S.: "Referring Patients for Cardiac Surgery". Alberta Medical Bulletin. 22(4):125-129, 1957.
5. Callaghan, J. C., and Fraser, R. S., Dvorkin, J., and Stewart, A. G.: "Acid Base Aspects of Extracorporeal Circulation". (Monograph) published February, 1958.
6. Bradshaw, K., Fraser, R. S., and McIntyre, J.: "The Effects of Chlorpromazine on Pulmonary Artery Pressure". (Submitted for publication.)

RESEARCH IN PROGRESS OR COMPLETED:

1. Fraser, R. S., and Monckton, G.: "Electroencephalographic Studies in Patients with Congenital Heart Disease". Ciba Company—$2,000.00.
2. Fraser, R. S., Rossall, R. E., and Beamish, W. E.: "Experimental Production of Electrical and Pulsus Alternans". Markle Trust Fund—$600.00.
3. Dougall, R., McLeod, L., and Fraser, R. S.: "Urinary Corticords in Patients Submitted to Open Heart Surgery".
4. Fraser, R. S., Dvorkin, J., and Beamish, W. E.: "Blood Volume and Acid-Base Regulation in Patients Undergoing Cardio-Pulmonary By-Pass". Committee for Allocation of Funds for Medical Research—$800.00.
5. Dvorkin, J., Fraser, R. S., and Rossall, R. E.: "Post-Operative Evaluation of Patients After Mitral Commissurotomy". Kinsmen Research Bed (approximately $1,500.00).
6. Holubitsky, W.: "Interatrial Block: Incidence and Relationship to Atrial Pressures".

# DEPARTMENT OF PSYCHIATRY

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital

Sir:

It is my privelege to submit to you a report of the activities of the Department of Psychiatry for the year ending March 31, 1958.

With the encouragement and ready support of yourself as Superintendent of the Hospital and of our Dean, this Department has planned and started to put into effect a program of considerable expansion. More beds have been assigned to the Department in the process of gradually tripling our total bed capacity. Our attending staff has been increased by the addition of Dr. Julius Guild. Two new appointments at the full-time Professorial level have been established. It is hoped that they will be filled shortly. Provision has also been made for the appointment of a psychologist and two social workers to our staff.

There has been a great increase in the amount of time given to undergraduate teaching of psychiatry. The appointment of a Teaching Fellow to our Department increased our teaching potential.

A post-graduate training program in psychiatry has been set up. Two residents are in training this year. Arrangements have been made for six residents to be in training during the coming year. The hospital has now received approval from the Royal College of Physicians and Surgeons of Canada for two years of post-graduate training in Psychiatry.

Clinical case conferences, with their teaching value to house staff and nurses, have become a regular feature of the Departmental program. Regular seminars in psychodynamics and psychotherapy have been instituted.

Out-patient service has expanded greatly. As a part of our out-patient service, consultation and therapy is provided for University students through the Students Advisory Service.

Structural alterations have been made which have provided several interviewing rooms without loss of bed capacity. Some of these rooms are equipped for training in interviewing for both under-graduate and post-graduate students.

Our total admissions for the year amounted to 535.

On behalf of all members of our staff I would like to express deep appreciation for the helpful co-operation of the Nursing Staff and for the ready assistance, encouragement and guidance of the Administrative Staff.

Respectfully submitted,

K. A. YONGE, M.D.,
*Director.*

# DEPARTMENT OF PAEDIATRICS

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital.

Sir:

I take pleasure in presenting the annual report of the Department of Paediatrics for the year ending the 31st of March, 1958.

In February of this year Station 24 was reopened giving an additional 20 beds to the Department and bringing the total paediatric beds to 105. School age convalescent and long term patients are being accommodated on Station 24 thus allowing for a quicker turnover of patients in the acute wards. School facilities are provided on the ward as are occupational programmes. Children attend the Rehabilitation Department as necessary. This grouping together of school age semi-ambulant patients makes it possible to ensure that the time they spend in hospital is both happy and profitable, over and above their medical care.

Dr. W. C. Taylor is a welcome addition to the full-time staff as Assistant Professor. He has contributed tremendously to the under-graduate and graduate training programmes in Paediatrics. Dr. P. J. Kimmitt, who recently completed his training in Montreal and Dr. G. Conradi have both joined the staff of the Department of Paediatrics of the hospital this year. Dr. G. Watkins has ably filled the post of Junior Resident this year and in June will be joined by Dr. J. A. Birkbeck and Dr. J. A. Reynar. Dr. Brenda Devlin is at present seconded to the Department of Medicine.

Members of this department have contributed six articles to the medical literature and presented seven papers at scientific meetings. Several research projects are in progress at the present time and more are in the planning stage. Changes in the undergraduate medical curriculum have been implemented. This has meant additional work on the part of the staff at this and other hospitals. A refresher course in Paediatrics was presented in the Fall for General Practitioners and appeared to be well received. Thanks to a generous gift from the Co-ordinating Council for Crippled Children, Dr. Neil Duncan was enabled to spend some time visiting Cardiac Centres in the United States and Canada. He is now making an active contribution to the cardio-vascular team at this hospital.

Paediatric out-patients on Monday and Thursday afternoons at 1 p.m. are now under the supervision of Dr. Taylor and 1,209 children have been seen, an average of 100 patients per month. There were 327 new patients and 48 required admission to hospital. It is encouraging to note that for the first three months of 1958 an average of 150 children per month were being seen. Dr. Duncan has started a monthly Cardiac Clinic. It is hoped that the volume of patients will continue to increase, and that more specialty clinics can be started. This department can render a useful service to the community as a whole and referrals are at all times most welcome. Spot checks show that on an average some 300 children under the age of 16 years are seen in the Emergency Department. Some 30 of these require admission. About 50 per month are brought because of accidents —trauma, burns, poisoning, etc. During the year there were 1,887 admissions to the Paediatric wards and 1,814 discharges. There were 39 deaths with an autopsy rate of 90%. About 50% of all admissions came in under a paediatrician, 41% under general and special surgeons, 6% for cardiovascular investigation and treatment and 3% for treatment under internists, dermatologists and psychiatrists. For the future it is hoped to provide a Poison Information Centre and services for emotionally disturbed children within the Department.

I would like to express my appreciation to the Staff of this Department for their loyalty and hard work, and welcome those who have joined us this year. In conclusion on behalf of the Department, we deeply appreciate the unfailing co-operation on the part of the nursing and administrative staff.

Respectfully submitted,

J. K. MARTIN, M.R.C.P.,
*Director*

## PUBLICATIONS BY MEMBERS OF THE DEPARTMENT OF PAEDIATRICS—1957-58

MARTIN, J. K., *An Outbreak of Nephritis at Treherne, Manitoba. Can. Med. Assoc. J., 77, 8. October 15, 1957.*

TAYLOR, W. C., *Tuberculosis in Infants and Children. Man. Medical Review. 37, 27, 1957.*

TAYLOR, W. C., *A Study of Acute Respiratory Disease in Infancy. J. Ped., 50: 6:679-688, June 1957.*

TAYLOR, W. C., *A study of Infantile Colic. Can. Med. Assoc. J., 76:458, 1957.*

CALDER, J., *Scurvy. Alberta Med. Bulletin, 21:3, August 1957 (with Dr. Jeanette Morrison).*

GRISDALE, L. C., *The Alberta Perinatal Mortality Study. Can. Med. Assoc. J., 78:256, February 15, 1958.*

## RESEARCH — DEPARTMENT OF PAEDIATRICS—1957-58

DR. J. K. MARTIN— Research in association with Cerebral Palsy Clinic of Edmonton.

Relationship of various obstetrical factors to the etiology and severity of Cerebral Palsy. (With Dr. J. Day.)

Dermal patterns in the child with Cerebral Palsy. (With Dr. M. Thompson.)

A study of enamel faults and its relationship to the time of cerebral damage. (With Dr. C. R. Castaldi.)

DR. W. C. TAYLOR— Proposed investigation into the Mortality and Morbidity of Replacement Transfusion.

The use of the respiratory rate in the first week of life as a guide to prognosis.

## PAPERS PRESENTED — DEPARTMENT OF PAEDIATRICS—1957-58

DR. J. K. MARTIN— September 2nd, 1957— *"Education of the Handicapped Child"* —Home Teachers' Programme.

September 5th, 1957— *"Stress in Children in Disaster"* — Address given at the Canadian Public Health Association — Nurses' Section Convention.

September 10th, 1957— *"Care of the Emotionally Disturbed Child"* — Parents' Group: Association for Emotionally Disturbed Children of Alberta.

October 28th, 1957— *"Subdural Haematoma"* Paediatric Post-Graduate Course.

November 6th, 1957— *"The Role of Physiotherapy in the Care of Children"* — Alberta Physiotherapy Association.

February 19th, 1958— *"Emotional Disturbances of Childhood"* —at the Red Deer Branch of the Alberta Medical Association Meeting.

February 21st, 1958— *"Rh Factor and ABO Incompatibility"* — Post-Graduate Course in Obstetrics and Gynaecology.

March 19th, 1958— *"Medicine as a Career"* — Presented to High School Students at St. Joseph's High School.

# DEPARTMENT OF PHARMACY

Dr. A. C. McGugan,

Superintendent,

University of Alberta Hospital

Sir:

It is my privilege to submit the annual report of the Department of Pharmacy for the fiscal year ending March 31st, 1958.

The cost of supplies for the year 1957-58 is proportional to past years and has not greatly increased due to the fact that there have been negligible price increases in pharmaceuticals. Large quantity purchases have been carried out as in the past, resulting in a saving in the cost per prescription. The inventory has been increased so as to prevent an abnormal purchase from occurring in the month of April. It is our desire to have a constant stock rather than a fluctuating one. This resulted in a lower turnover for the year.

Product duplication and combinations marketed by the various pharmaceutical manufacturers complicated our stocks. The establishment of our new formulary should facilitate the teaching of the House Staff, by the Medical Staff, of the basic drugs, thus effecting a greater saving to the Hospital.

Some 500 personal hours work have been put in by the Director in preparing our formulary, which has now gone to press. It is expected that this formulary should be completed by July 15th, 1958. The co-operation and assistance obtained from Doctors Rodman, Dvorkin, and Willox have greatly helped in the compilation of this formulary. It is estimated that a total of approximately 900 man hours was needed for this compilation.

The established emergency night stock system has not been inaugurated. It is felt that it would be more functional at the time that the formulary is available.

This department plans to establish a ward supply system so as to assure adequate stocks on each nursing station. Repeatedly house officers and medical staff complain that the nursing stations do not have the listed emergency stocks available at the time of need. We feel that the establishment of this supply system, independent of nursing requisitions, will overcome this stock imbalance.

For the last eight years this department has taken an active part in offering a laboratory period in the hospital to the final year pharmacy students from the Faculty of Pharmacy. In this last year a greater effort has been made to instil the basic requirements of hospital pharmacy in these students. The Faculty have co-operated extensively and are planning to use our facilities to a greater extent.

The teaching of Pharmacology to nursing students has again been carried out as in the past.

In the last year a survey was carried out on Hospital Pharmacy at the Women's College Hospital, Mt. Sinai, Sick Children's, Toronto; General Hospital, Montreal; Indiana Medical Centre, Indianapolis; Illinois Research Centre, University Clinics, Chicago. At the same time the following manufacturing firms were visited to obtain knowledge of production techniques. Viewed were E. B. Shuttleworth Co., Toronto; Merck Sharp & Dohme, Montreal; Eli Lilly & Co., Indianapolis; Abbott Laboratories, Chicago. Miss Schnell observed the pharmacy at the University of Saskatchewan in an effort to aid in developing our techniques.

Prepacking equipment in the form of a Rotax Counter and an ointment tube filling and sealing machine has been installed and it is our thought that we shall be able to prepackage all our supplies so as to expedite the issue of floor stocks and the filling of prescriptions. It is felt that a greater work load can be handled by our present staff of six pharmacists even though we are undermanned according to hospital standards (which require 1 pharmacist for every 100 patients); thus making a substantial saving in manpower to this hospital.

A summary of the work done, the costs during 1957, and a summary of the antibiotics and corticotrophic hormone purchases is shown on the attached sheet.

Respectfully submitted,

W. W. Maday, B.Sc.,

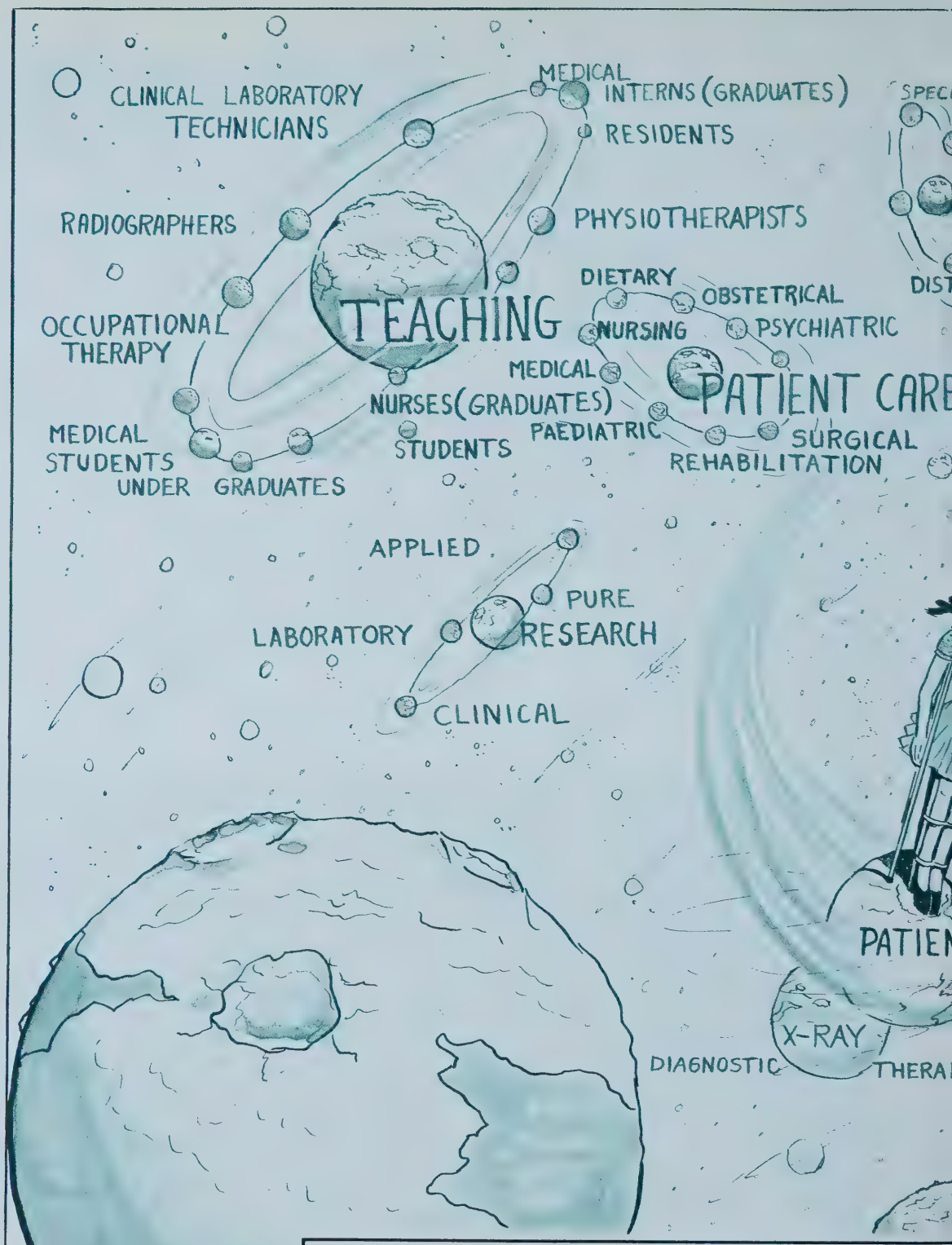
*Director of Pharmaceutical Services.*

| | 1955-56 | 1956-57 | 1957-58 |
|---|---|---|---|
| Prescription Supplies at Cost | $111,168.83 | $101,527.19 | $131,445.32 |
| Floor Drugs | 9,299.61 | 10,334.02 | 12,291.51 |
| Mewburn Pavilion | 4,516.28 | 5,497.57 | 4,753.37 |
| Case Room | 2,992.93 | 3,865.64 | 3,397.01 |
| Operating Room | 12,042.70 | 14,157.68 | 15,051.86 |
| O. P. D. | 4,442.28 | 6,353.53 | 9,932.83 |
| X-Ray:opy | 3,191.74 | 3,212.24 | 3,478.06 |
| Cystoscopy | 3,532.92 | 3,177.37 | 3,043.78 |
| Obstetrics | 1,985.24 | 2,578.32 | 2,111.17 |
| Diet Kitchens | 2,828.72 | 4,081.16 | 2,754.47 |
| South Pavilion | 1,358.25 | 496.46 | 733.57 |
| Ground East | 1,192.18 | 1,350.10 | 847.41 |
| Laboratories | 3,786.34 | 4,891.63 | 5,235.64 |
| Emergency Unit | 3,638.46 | 3,454.63 | 2,979.86 |
| SML Departments | 6,736.45 | 8,035.53 | 980.62 |
| Liquor Purchases | 1,598.60 | 1,825.60 | 2,546.30 |
| Central Supply Room | ------- | ------- | 3,295.63 |
| Health Service | ------- | ------- | 3,430.32 |
| | $174,313.53 | $175,838.96 | $208,308.75 |
| Stock Inventory | 36,118.18 | 39,915.60 | 60,574.08 |
| Stock Turnover | 4.9 | 4.5 | 3.4 |
| Prescriptions | 88,364 | 108,892 | 128,824 |
| Floor Requisitions | 10,875 | 10,903 | 16,152 |
| SML Departments | 3,159 | 3,173 | 4,336 |
| Antibiotics | 83,228 | 84,430 | 88,243 |
| Narcotic Requisitions | 11,054 | 11,994 | 12,208 |
| Daily Average | 656 | 669 | 693 |

Comparative costs of antibiotics for the past three years.

| | 1955-56 | 1956-57 | 1957-58 |
|---|---|---|---|
| Crystalline Penicillin | $ 818.00 | $ 6,046.00 | $ 5,394.49 |
| Proc. Aq. Pen. 400 M.U. | 4,585.00 | 2,198.00 | 2,671.05 |
| Streptomycin | 232.00 | 285.00 | 478.61 |
| Pen. Proc. Aq./c Strep. | 2,672.00 | 1,035.00 | 1,022.26 |
| "Estopen" | 80.00 | ----- | ----- |
| Neomycin | 580.00 | 832.00 | 921.00 |
| Bacitracin | 150.00 | 207.00 | 707.00 |
| Aerosporin | 22.00 | 180.00 | 102.00 |
| Chlortetracycline | 916.00 | 278.00 | 483.97 |
| Chloramphenicol | 9,528.00 | 16,578.00 | 22,654.77 |
| Oxytetracycline | 6,872.00 | 4,065.00 | 3,378.46 |
| Tetracycline | 1,806.00 | 2,615.00 | 4,367.00 |
| Erythromycin | 5,724.00 | 3,282.00 | 3,012.00 |
| Cortisone | 1,237.00 | 2,033.00 | 1,330.00 |
| Hydrocortone | 2,748.00 | 2,647.00 | 3,868.00 |
| Prednisone | 1,491.00 | 4,490.00 | 5,365.00 |
| "Varidase" | 108.00 | 465.00 | 66.00 |
| A. C. T. H. | 935.00 | 575.00 | 946.00 |
| Novobiocin | ----- | 1,887.00 | 1,496.00 |
| Oleandomycin | ----- | 75.00 | 114.00 |
| Prednisolone | ----- | ----- | 1,174.00 |
| Triamcinolone | ----- | ----- | 444.00 |
| Spiromycin | ----- | ----- | 180.00 |
| Ristocitin | ----- | ----- | 2,072.00 |
| | $40,504.00 | $49,775.00 | $62,247.61 |

The Children's Hour

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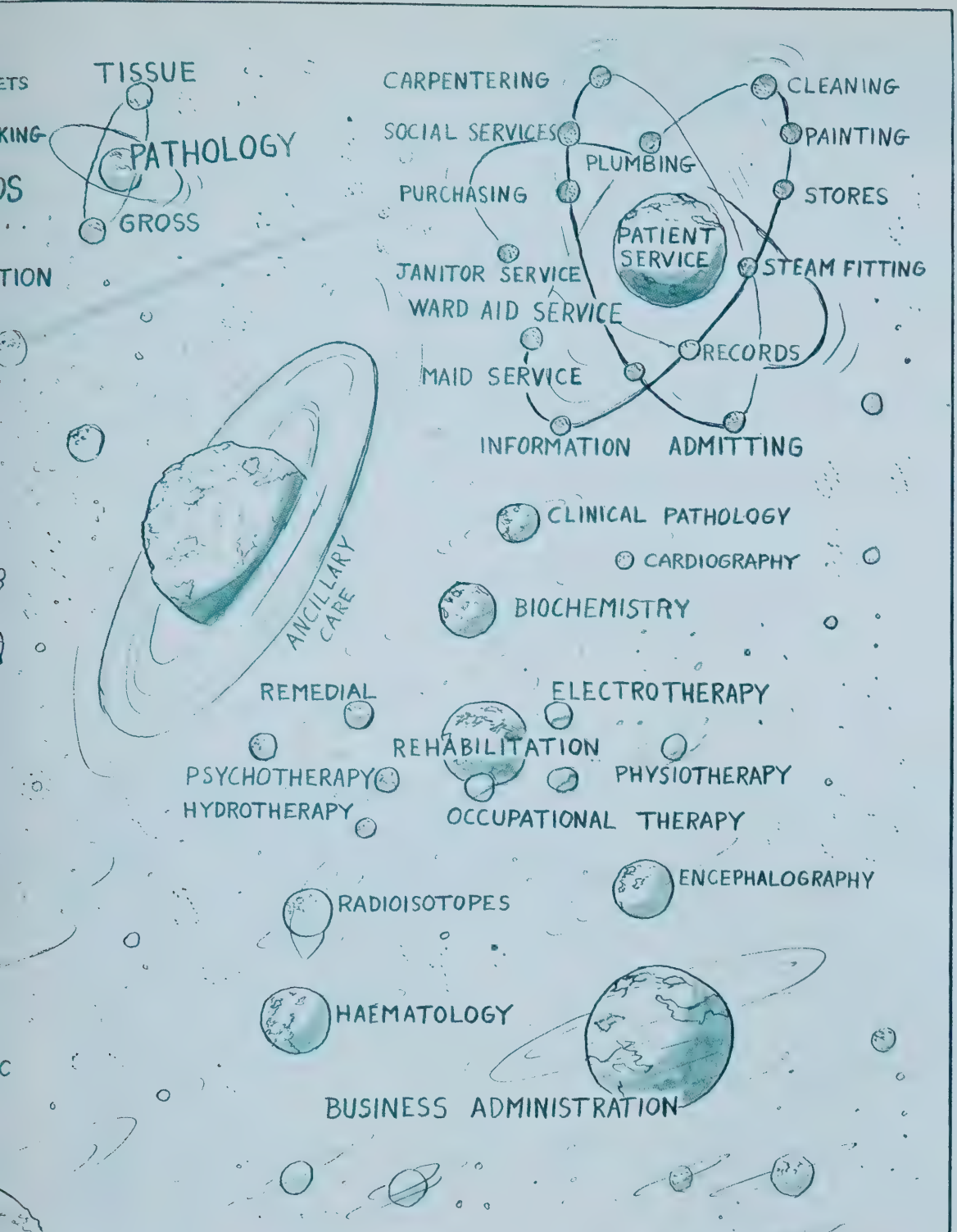


**UNIVERSE**

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**l as direct (to the patients of to-day) and**
**ents of to-morrow).**

# DEPARTMENT OF RADIOLOGY

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital

Sir:

It is my privilege to submit the annual report of the Department of Radiology, for the fiscal year ending March 31st, 1958.

| | |
|---|---|
| Number of patients examined | 25,017 |
| Number of radiographic examinations | 30,036 |
| Number of large films used | 75,320 |
| Number of miniature films used | 6,833 |
| Total fluoroscopic examinations | 3,607 |
| Number of patients for deep therapy | 249 |
| Number of deep therapy treatments | 1,344 |
| Number of patients for superficial therapy | 520 |
| Number of superficial therapy treatments | 1,523 |

There has been about a 15% increase in the number of patients examined and in the number of radiographic examinations this year as compared to last year. In addition to the above figures 6 cases of possible active tuberculosis, 123 cases of inactive tuberculosis, and 497 other abnormalities were found in the Admission Tuberculosis Survey.

Doctor A. J. M. Griffiths left the Department of Radiology, August 1st 1957, to take a new post in Antigonish, Nova Scotia. Doctor D. Gunn joined the Department of Radiology, July 1st, 1957. Doctor J. Mason will be attached to the staff of the Department, commencing July 1st, 1958.

The combined project of the Department of Physics, University of Alberta, and the Department of Radiology, University of Alberta Hospital, concerning the use of radioactive phosphorous in the treatment of port wine stains is continuing. About thirty patients have been treated to date with fairly satisfactory results. Another project with the help of the Department of Physics has been started. It is concerned with the measurements of various types of radiation in the body. We are particularly interested in total body radiation, and in attempting to estimate gonadal dosage from various internally administered radioactive isotopes.

Several papers were given by the Director of the Department, H. E. Duggan, M.D. The topics were: "Results with Radioactive Isotopes," "New Concepts in the Treatment of Arthritis", and "The General Effects of Radiation".

The plan for the new X-ray Department has been completed. I believe that this plan will be unique as far as X-ray Departments in Canada are concerned.

The present Department has been altered so that a new type of x-ray apparatus for fluoroscopic image amplification and intensification can be installed. This apparatus will have a Cineradiographic attachment. I believe that this apparatus is the first of its kind in Canada. It will be used primarily in conjunction with cardiovascular examinations. One of the chief features is the marked

reduction in the dosage of radiation to the patient. This is very important in cases which require long periods of fluoroscopy. A Polaroid Unit was purchased for use in the Operating Room. This enables us to produce a finished film in approximately sixty seconds from the time of its being taken. This greatly facilitates and accelerates operative procedures such as the pinning of fractured femurs.

Fifteen patients received radioactive phosphorus, and six patients radioactive gold. A new type of probe has been purchased for the localization of eye tumors. The patient is given radioactive phosphorus, and in some cases a differential count can be obtained over the tumor, and over normal tissues. Considerable work is being done using radioactive iodinated human serum albumin, and radioactive iodinated rose bengal to pick up metastatic tumors in the liver. The new Scintiscanner is used in this work.

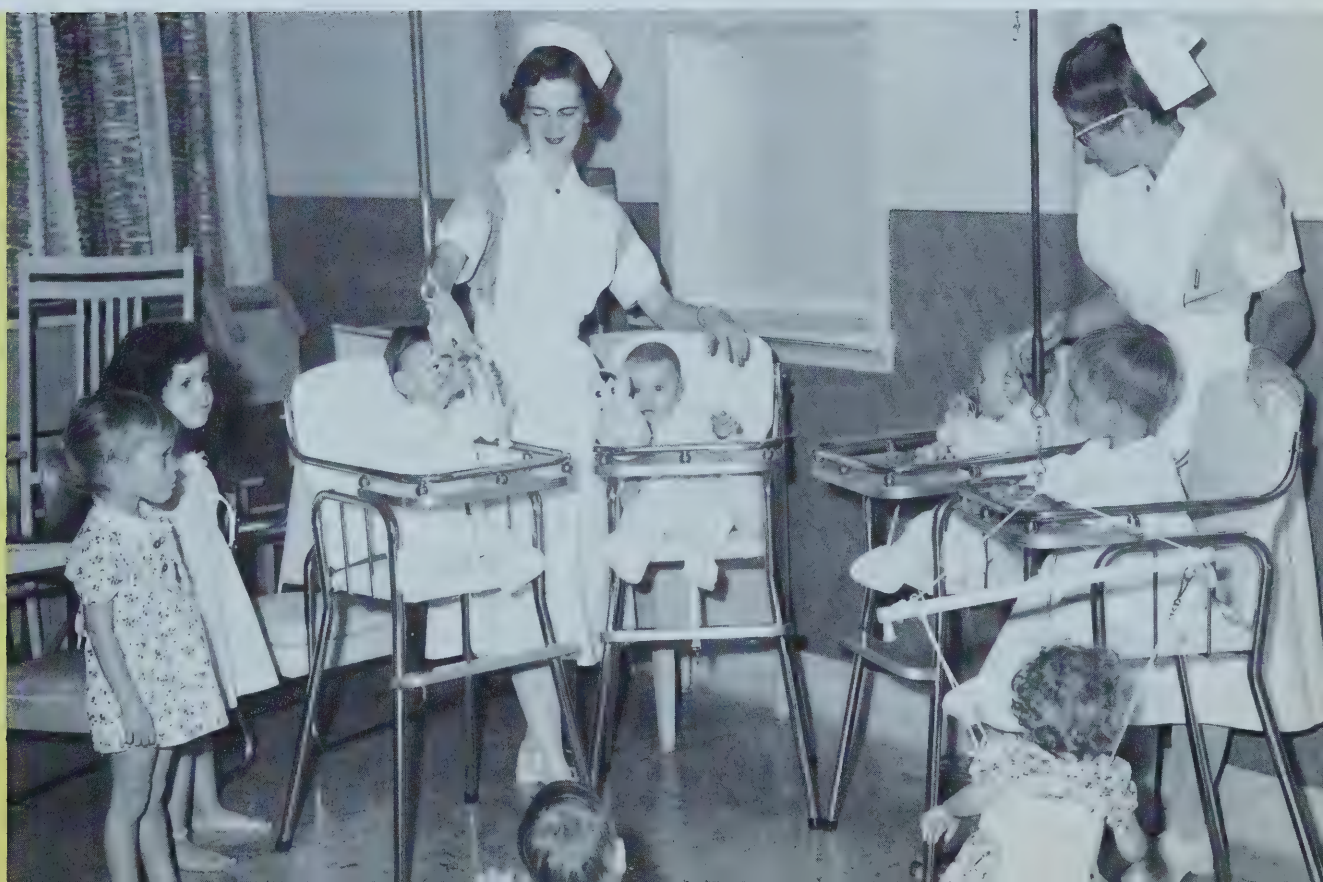
I was fortunate enough to be given the degree of Fellow of the American College of Radiology. This honour was conferred upon me last year in Chicago.

May I take this opportunity to thank you and your staff for your excellent cooperation during the past year.

Respectfully submitted,

H. E. DUGGAN, M.D., F.A.C.R.
*Director*

Playtime



# DEPARTMENT OF PATHOLOGY

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital

Sir:

I am privileged to present the annual report of the Department of Pathology for the year ending March 31, 1958.

During the year 4,985 surgical specimens were examined and reported upon,—an increase of almost 400 over the previous year. A diagnosis of cancer was made in 434 cases.

Immediate diagnosis by the frozen section technique was carried out in 202 cases, allowing surgical procedures to be completed without delay when the biopsy specimen showed cancer to be present. The number of specimens examined by this technique has quadrupled since 1954.

Examination of smears of secretions from various parts of the body for the presence of cancer cells was done in 226 cases, and in 25 of these, cancer cells were found to be present. The secretions examined were chiefly from the cervix and lung.

Autopsy examinations were performed in 374 cases during the year. This comprises over 75% of the deaths occurring in the hospital, and compares favorably with hospitals of comparable size across the country.

It is gratifying to report that preliminary plans for a much-needed new morgue have been drawn up, and it is hoped that construction will start shortly.

Dr. G. O. Bain, returned to a permanent position in the Department of Pathology, July 1, 1957, and is making a valuable contribution in surgical pathology, teaching and research.

Dr. T. K. Shnitka, will complete his training in Pathology in the department, July 1, 1958, and will write Certification examinations of the Royal College of Physicians and Surgeons of Canada this fall.

Drs. A. H. Christensen, H. E. Bell, and R. J. Swallow, are continuing their studies towards completion of training in the specialty of Pathology.

In addition, the Department of Pathology, co-operated with other departments, in making available six-month interneships in Pathology, for those training in other specialties.

It is a pleasure to acknowledge the help and co-operation which the Department of Pathology has received from the administration, during the year.

All of which is respectfully submitted,

J. W. MACGREGOR, M.D.,
*Director*

# CLINICAL LABORATORY SERVICES

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital

Sir:

It is my privilege to submit the annual report from the Department of Clinical Laboratory Services for the fiscal year 1957-58. A statistical review of the technical work done with a comparison with previous years is appended. There has been a substantial increase in work done in almost all fields in the laboratory which is a reflection of the growth of the hospital.

Some additional laboratory space adjacent to the main laboratory was made available during the year and this relieved to a large extent the congestion in the routine laboratory. Space is still very much at a premium and is particularly required to accommodate developments in special services. No immediate solution to the space problem will be found until the space in the Service Wing is available.

During the year progress was made in the development of an enzyme laboratory and further work in expanding techniques for this type of biochemical investigation is being carried out. Also, the method for the determination of protein bound iodine was set up in the laboratory. A further significant development was the purchase of an Autoanalyser early in the spring of this year. This equipment is the first major introduction of automation into clinical chemistry. It has been very successful and has more than doubled our capacity to do analyses for blood sugar and blood urea nitrogen with a major saving in staff and laboratory glassware. We shall endeavour to adapt other methods of measurement of blood constituents to this type of automatic analysis as soon as it is practical to do so.

Trained technical staff is still very difficult to obtain. The majority of the staff in the laboratories in the hospital are those who have been trained in the training program in this department. We are extremely short of technicians with a university background and a degree of science. These people are required for senior positions in the laboratory and much developmental work is dependent upon the availability of this type of staff. The assistance in the laboratory of a person who has a medical degree and advanced training and qualifications in laboratory work, particularly biochemistry, is badly needed. It is hoped that some such appointment will be made in the very near future.

Miss E. Chesney, who has been supervisor in the chemistry section in the laboratory since it was established in the hospital in 1946 has left to undertake studies for a higher degree in biochemistry at the University of Alberta. We are grateful for the excellent service which Miss Chesney rendered the hospital during her years here.

In the Radioisotope Laboratory we were fortunate in obtaining the services of a physicist to work on problems of total body radiation and to assist in the red cell survival studies with radioactive chromium. This has greatly accelerated studies in these fields. A scintiscanner was obtained which will permit the extension of diagnostic procedures, particularly the detection of cancer metastases.

A weekly teaching conference in the form of clinical pathology rounds at which interesting laboratory material is demonstrated and diagnostic procedures are discussed was commenced in the fall. Dr. T. K. Shnitka, pathology fellow, completed a year's training in the clinical laboratories and Dr. A. H. Christensen commenced his training during the year. The policy has been established with the Department of Medicine whereby medical housemen will rotate for a brief period of training through the laboratory to become better acquainted with the laboratory aspects of medicine; in particular the logical application of laboratory methods to the diagnosis and management of disease.

The laboratory has continued to assist in research programs carried out in other departments. The studies on Anemia in Cancer are being continued under a grant from the Alberta Division of the Canadian Cancer Society. A report on this work was given at a Medical Staff meeting at the University of Alberta Hospital in the fall.

I should like to express my thanks to the administration for the excellent co-operation they have shown in solving mutual problems. I should also like to express my thanks to the many members of the laboratory staff who have given very efficient and loyal service often under very trying circumstances.

Respectfully submitted,

R. Edward Bell, M.D.,
*Director*

## DEPARTMENT OF CLINICAL LABORATORY SERVICES

| | 1955-56 | 1956-57 | 1957-58 |
|---|---|---|---|
| Hematology | 96,830 | 98,519 | 118,878 |
| Urinalysis | 47,518 | 43,839 | 35,185 |
| Miscellaneous | 3,441 | 3,320 | 4,223 |
| Bone marrow biopsies and peripheral blood smears | 592 | 673 | 849 |
| E.C.G. | 3,766 | 4,130 | 4,771 |
| B.M.R. | 718 | 738 | 757 |
| E.E.G. | 999 | 1,075 | 1,400 |
| Red Cross | | | |
| Transfusions | 4,171 | 4,575 | 5,313 |
| Plasma | 5 | -- | -- |
| Typing | 5,444 | 5,810 | 6,705 |
| Biochemistry | 28,059 | 30,382 | 33,949 |
| Endocrinology | 2,027 | 2,641 | 2,769 |
| Radioisotope Laboratory | | | |
| Thyroid uptakes | 721 | 924 | 961 |
| Other Diagnostic Procedures | -- | 167 | 217 |
| Hyperthyroid Treatment | 86 | 93 | 109 |
| O.P.D. Laboratory | 3,130 | 3,414 | 5,516 |
| Ultra Micro Laboratory | -- | 1,520 | 5,644 |
| | 197,507 | 201,820 | 227,246 |
| Bacteriology and Serology (Provincial Laboratory) | 70,536* | 76,870* | 84,599* |

*Reported in unit values—approximately 2 or more units per test.

# REHABILITATION

# REHABILITATION

Dr. A. C. McGugan,

Superintendent,

University of Alberta Hospital

Sir:

I have pleasure in submitting the annual report of the Rehabilitation Department for the year ending March 31st, 1958.

Two factors distinguish this year from all previous years, and as a result have improved the type and scope of Rehabilitation available enormously. These are: (1) the department's move from the basement of the Mewburn Pavilion to the fine new department on the main floor of the new Poliomyelitis and Paediatrics wing in June, 1957, and (2) the opening of the new Rehabilitation Ward on 66 in January 1958.

The following entirely new facilities for treatment in the various sections of the Rehabilitation Department have become available since the move into the new department.

## HYDROTHERAPY

Steam Baths: Four steam baths are now available compared to the previous two, and the section is divided into a male and female section—where previously only facilities for men existed.
Pool therapy: The remedial pool now provides facilities, previously unavailable, for gait training and muscle re-education for all conditions affecting the locomotor system.

Hubbard tanks: A second Hubbard tank now enables us to keep one tank as a sterile tank for treating badly infected burns, decubiti, etc. The value of the Hubbard tank in the mechanical and osmotic debridement of wounds and the prevention of contractures is well established in burn units. We have welcomed the co-operation given us by the Department of Surgery in making use of this new facility.

## GYMNASIUM

The large area divided into (1) heavy resistance room, (2) space for class therapy and (3) space for gait training has enabled us to keep many more patients under much more prolonged treatment.

We no longer have to limit the time patients use standing boards, wall pulleys, parallel bars, etc., which had to be done in the old department because of lack of space and essential equipment.

## OCCUPATIONAL THERAPY

Previously occupational therapy had such cramped quarters that much of the therapist's time was spent walking to and from wards. Now with all the space available much more adequate treatment and supervision are possible.

Activities of daily living. This room has proved invaluable in training wheelchair patients in many of their self care (e.g. dressing and toilet) activities.

Housewife's section. This section has also proven its value in the training of disabled housewives. It is now routine to put all disabled housewives through this section assessing their capabilities for preparing and cooking meals, ironing and sewing. Shortage of staff prevents us from using this section as much as one would wish.

The Junior Hospital League have generously provided helpers to assist in the kitchen training unit.

Recreation - Lecture room. This room has the function of a recreation room with table-tennis, shuffle board, etc., and also by virtue of stacking chairs can be used as a lecture room for

seminars, conferences etc. For anyone who doubts the value or place of recreation in the hospital setting, we would invite them to see the spectacle of a quadriplegic and a quadruped amputee playing table tennis. The improvement of both function and morale is quite dramatic.

## ELECTROMYOGRAPHY

Although the electromyograph has been available since November, the practical use of this valuable instrument has been restricted because of gross electrical interference affecting recording. In spite of this it has already proven itself invaluable as a diagnostic and teaching instrument.

It is hoped that adequate screening will be provided soon and the instrument will be available not only for routine use in diagnosis but also in research on muscular dystrophy.

## OUT-PATIENTS

Since the new department has been opened, we have not had to stop taking out-patients at any time even though the out-patient load has increased during this period.

## REHABILITATION WARD

The opening of a ward specifically for patients whose main treatment is rehabilitation, in spite of growing pains, is now resulting in a much better pattern of integrated treatment.

We are fortunate to have obtained grants enabling various members of the rehabilitation team to see the operation of various Rehabilitation Centres. These grants came from the Civilian Medical Rehabilitation Grant—a federal fund devoted to the promotion of Rehabilitation in each Province.

We are particularly fortunate in obtaining the help of Dr. J. O. Metcalfe and Dr. G. L. Willox from the Department of Surgery who spent a week at the Veterans' Paraplegic Centre at Long Beach, California. Since their return their advice and support have been invaluable in the establishment of a bowel and bladder training programme and in the prophylaxis and treatment of decubiti on the Rehabilitation Ward.

We are also fortunate in the fact that the Nursing Office sent Miss Buck, the Charge Nurse, to a three-week course on Rehabilitation nursing at the Rancho Los Amigos in California. Miss Buck's interest in Rehabilitation and team approach is helping enormously in the establishment of a well-integrated Rehabilitation treatment programme including physician, social worker, nurse, physiotherapist, occupational therapist and speech therapist.

In the ten weeks since the ward was opened on January 16, 1958, 26 patients have been admitted and six discharged. The following types of cases have been, or are being, rehabilitated:

| | |
|---|---|
| Paraplegia | 12 |
| Quadriplegia | 6 |
| C.V.A. | 5 |
| Multiple sclerosis | 2 |
| Monoplegia | 1 |

## CONGRESSES

I was a Canadian Delegate at the Seventh World Congress of the International Society for the Welfare of Cripples in London, England in July, 1957. During the past year I have visited many centres with a view to improving existing facilities at the University Hospital. In England I visited Stoke Mandeville paraplegic centre, St. Thomas' Hospital and Kings College Hospital. In the U.S.A., I visited the Institute of Rehabilitation, N.Y.U. Bellevue Medical Centre, the Kessler Institute and the Institute of Crippled and Disabled in New York. I also visited the Mayo Clinic. In Canada I visited Lyndhurst Lodge, Toronto General Hospital, Toronto Western Hospital and Sunnybrook Hospital in Toronto.

## EDUCATION IN REHABILITATION

During the past year the majority of members of the department have helped in programmes designed to educate both lay and professional groups in Rehabilitation.

June 1957— C.M.A. Convention, Edmonton.

Closed circuit T.V. programme
"Rehabilitation of the Hemiplegic".

October 1957— Convention of Associated Hospitals of Alberta.
Demonstration of value of Physical Medicine in Rehabilitation.

March 1958—Symposium on Surgical Short Course on Trauma.
Tour of Department and demonstration of use of physical methods in surgical rehabilitation of trauma.

## ARTICLE ON REHABILITATION DEPARTMENT.

Mr. H. Arthur Henderson, the Provincial Architect, and I have written an article describing the department in "A Medical Rehabilitation Centre" in "Canadian Hospital", February 1958.

## APPROVAL FOR RESIDENT TRAINING.

The department has been approved by the Royal College of Physicians and Surgeons of Canada for two years' residency training towards the Fellowship in Physical Medicine and Rehabilitation in the Royal College.

## STATISTICAL REPORT

### PHYSIOTHERAPY AND HYDROTHERAPY SECTION.

| | |
|---|---|
| Total number of treatments given | 52,079 |
| Total number of patients treated | 4,378 |
| Total number of polio treatments given | 7,336 |
| Total monthly average for polio patients treated | 44 |

### REMEDIAL EXERCISE SECTION

| | |
|---|---|
| Total number of treatments given | 17,008 |
| Total number of patients treated | 2,160 |

### OCCUPATIONAL THERAPY.

| | |
|---|---|
| Total number of treatments given | 14,729 |
| Total number of patients treated | 1,573 |

In comparison with last year, it will be seen that the numbers of treatments given have increased in all sections except in the case of polio.

Physiotherapy and Hydrotherapy Section treatments up 62% over last year.

Remedial Exercise Section treatments up 36% over last year.

Occupational Therapy Section treatments up 39% over last year.

Poliomyelitis treatments down 26% from last year.

The increased number of treatments is almost in direct relationship to the increased number of patients, except in physiotherapy where more patients are now being treated twice daily. The decrease in the number of polio treatments is related to the smaller number of patients (average monthly number of polio patients is now only 44 compared with 62 last year). As only one occupational therapist has been added to the staff since last year, the overall increase of 38% more treatments given this year than last reflects on the improved facilities in the new department.

In conclusion, I would like to say that prior to and following the move into both the new department and the ward, a great deal of work was involved and I am extremely grateful to not only my own staff but the carpenters and engineers and all the administrative staff that the transfer has been affected so well.

I am especially grateful for the backing that we have received from yourself, and department heads.

Respectfully submitted,

M. T. F. Carpendale, M.D.

*Director*

# MAINTENANCE

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital

Sir:

I hereby submit the annual maintenance report for the year ending March 31st, 1958.

*Janitors:* We now have 35 janitors including three garbage men and two elevator operators, who are responsible for over 550,000 square feet of area. They were issued new olive green uniforms this year (shirts and trousers instead of overalls).

*Equipment and Furnishings:* Equipment amounting to $440,000.00 was tagged, set up in the books and put into use in the Poliomyelitis and Paediatric wing, and Servery.

A new Central Equipment Depot was established which will be in operation shortly.

All venetian blinds (250) were renewed in the 1950 addition.

*Maintenance:* A program of preventive maintenance was set up in which a record is kept of the work done and repairs needed to electrical and plumbing fixtures, furniture and equipment, windows, doors, walls, etc.

Throughout the hospital we have over 13,000 castors to keep rolling (quietly).

*Painting:* 400 gallons of paint were used to paint 22,000 square yards of surface. Besides this, 650 outside window sashes, 1,200 window screens, and over 2,300 items in the shop were painted.

*Moves and Renovations:* Administration was moved to the new building; School of Nursing was moved to old N.S. 25; Polio patients were moved to the new building; The Teaching Department was moved from the Nurses' Residence to N.S. 32 then back to the new teaching area; The new Cafeteria was opened; Medical Records Department was moved to a new location; Clothes Room was moved to a new location; New Out-Patient Laboratory was established; Admitting Room Booking Office was set up; A 110 room addition was opened in the nurses' residence and furnishings were moved from N.S. 46 and 47; Children's Ward was moved and the old ward remodelled. Printing department was moved to old Staff Cafeteria; Photographic department was extended to include the old Printing Room; New Doctors' Lounge was made available; House Staff Library was moved to old Doctors' Room; X-Ray office was moved to old Library; New X-Ray machine installed; Rehabilitation department was moved to the new wing; Old Staff lockers were moved to the new wing; Engineers moved to the new wing; New Doctors' Offices were established; Orthopaedic patients were moved to N.S. 46, 47.

I would like to thank all of the Departments for their co-operation and will appreciate any suggestions for more efficient and helpful service.

Respectfully submitted,

Ellis Rose,
*Maintenance Co-ordinator*

# SOCIAL SERVICE DEPARTMENT

Dr. A. C. McGugan,

Superintendent,

University of Alberta Hospital

Sir:

I am pleased to submit the annual report of the Social Service Department for the year ending March 31st, 1958.

The case load has remained at the same level as during the 1956 - 1957 fiscal year, with forty to fifty new cases each month. However, there has been a significant increase in the number of referrals made to the Department since the first of January, 1958, which forecasts higher figures for the coming year.

The kind support and guidance extended to us by the administration, and medical and nursing staffs has been most appreciated. We received requests for services from seventy-nine staff physicians as compared to sixty-seven the preceding year. The close liaison with the medical staff is maintained through weekly ward rounds and clinics, as well as personal consultations with the physicians. There has been a steady improvement in the way referrals are reaching the Department. Patients are being referred at an earlier phase in their treatment and the majority of the staff are now making requests for consultations in writing. Both these measures facilitate the work of this Department and greatly improve the effectiveness of the services we are able to offer to the patient.

Of the many problems confronting the Department, the most acute continues to be the lack of adequate facilities for the care of the chronically ill. There were 108 patients from this hospital requiring care in one of our three major nursing homes last year. These institutions have long waiting lists and we often experience delays of one to two months, or even longer, in releasing our active treatment beds. For patients requiring minimal nursing care, there are sixteen institutions in the city licensed as Homes for the Aged and Infirm. These too, are over-crowded and rarely have an immediate vacancy.

There is a growing concern throughout the whole province about the question of housing for our seriously disabled patients, particularly in the younger age groups. Those in wheelchairs require special modifications to the house, such as a ramp, as well as lifting or other devices to help in their self care. Doorways must be wide enough, and bathrooms and bedrooms sufficiently large enough to accommodate a wheel chair. Some require assistance with their daily activities, such as dressing and undressing. Many of our patients are barred from seeking employment in the city, because boarding homes are not available for them. Since the opening of the new Rehabilitation Wing of the hospital, disabled patients requiring help in locating accommodation are coming to our attention in ever increasing numbers. It is an almost impossible task to find suitable board and lodging for wheelchair patients, where they can manage the activities of daily living and a job as well.

Lacking suitable resources, they either remain in hospital much longer than their medical condition warrants, return to homes outside Edmonton, where vocational rehabilitation facilities are non-existent, or are transferred to institutions designed primarily for the care of the elderly. Quite apart from the fact that it is detrimental to the younger patient to be accommodated in an environment where there is relatively little emphasis on rehabilitation and self care, the drain on public funds in each case is inordinately high.

To consider all aspects of this problem, a meeting was held in March of this year at which this Department was represented. There were also representatives of the Provincial Government, the City of Edmonton, the surrounding municipalities and several interested rehabilitation agencies. One possible solution put forth was the establishment, by one or more voluntary agencies, of a "Co-op" housing unit where the working disabled could all be housed under one roof, with a supervisor in charge.

It was thought it could operate on a self-supporting basis and that the cost of the building could be liquidated in a few years if each resident paid even the usual rate for room and board. With some patients, of course, vocational rehabilitation is not possible and other types of accommodation would have to be considered for them. The group plan a follow-up meeting to consider the next steps to be taken in the attempt to solve this urgent problem.

This Department is often called upon to locate accommodation for relatives of patients, or for cancer patients from out of town taking treatment at the Cancer Clinic. Ten new homes in the vicinity of the hospital were investigated and approved by the Department last year. The majority of these, however, do not offer room and board, but rather housekeeping facilities or sleeping accommodation only.

The Polio Home Care Committee, directed by Dr. J. Frank Elliott, has continued to meet at intervals during the past year. Two respiratory polio patients were discharged home in 1957 with respiratory apparatus supplied by the Department of Public Health. Both were young married patients, whose morale has benefited enormously from being re-united with their families. The Canadian Foundation for Poliomyelitis undertook several ancillary services on behalf of both patients. They provided for the installation of a ramp, agreed to pay for a full-time housekeeper in the home, and in addition, supplied wheelchairs and taxi transportation for the patients to enable them to return to the hospital for physiotherapy and training in activities of daily living. More respiratory equipment for home care has been requested from the Department of Public Health and the Committee is hopeful that five or six more patients still on the respiratory ward will be discharged home next year. One of the biggest problems we face in our endeavor to return patients to their own homes, is locating adequate housekeeper services at a reasonable cost. It is mandatory in practically every case that the families of our respiratory polio patients have either part-time or full-time housekeeping assistance in the home.

The splendid contribution made by the Canadian Foundation for Poliomyelitis, which granted financial assistance to twenty-eight of our polio patients this past year, has been invaluable. We are also grateful to the Central Volunteer Bureau, who have volunteered drivers for our patients on innumerable occasions, to the V.O.N. who have continued their excellent home nursing services, to the Red Cross, who have provided layettes, wheelchairs and other supplies to our indigent patients, and to the ladies of the Hospital Auxiliary, whose cheerful performance of countless duties has rendered our task so much easier. Our grateful acknowledgment is also extended to the following community agencies for their essential contributions to the welfare of our patients: The Department of Public Welfare, the Department of Public Health, Provincial Co-ordinator of Rehabilitation, Department of Veterans' Affairs, Workmen's Compensation Board, Special Placements Branch, National Employment Service, City Welfare Department, Family Service Bureau, Canadian Cancer Society, Co-ordination Council for Crippled Children, Canadian Vocational Training, Rehabilitation Society of Alberta, Edmonton Branch, and the Salvation Army.

The writer participated in several community activities during the year. One of the highlights was the Fall Institute sponsored by the Edmonton Council of Community Services. This was a two-day institute, devoted to exploring various areas of community need. Representatives from the forty-six organizations in the city attended. I am indeed grateful to the administration of this Hospital for sending me as a delegate, thereby demonstrating its continued interest in community projects of this nature. The Social Worker has also been active in the Edmonton Rehabilitation Study Group, serving this year on the executive as Corresponding Secretary. This group, comprised of representatives from thirty agencies active in the field of rehabilitation, has been meeting regularly each month for the past four years. Its principal aim has been to effect better co-ordination of rehabilitation services. This objective, it is hoped, will be furthered by our affiliation this year with the Edmonton Council of Community Services.

In closing, I would respectfully urge that consideration be given to enlarging the staff of this Department to include more than one Social Worker. Referrals come to the Department from every medical and administrative service in the Hospital. Our work in the Rehabilitation Wing alone is, of necessity, time-consuming. Then too, with a steady increase in administrative duties, it leaves the Social Worker less time than desired to devote to case work services to the patient, which we feel is the primary function of the Medical Social Worker.

Respectfully submitted,

(Mrs.) S. Philip, B.A.
*Director*

## STATISTICAL REPORT FROM THE SOCIAL SERVICE DEPARTMENT

The following figures will indicate the number and nature of referrals received during the 1957-1958 fiscal year.

| | |
|---|---|
| Social histories obtained | 485 |
| Patients transferred to nursing homes | 108 |
| Patients transferred to licensed boarding homes, or Homes for the Aged and Infirm | 50 |
| Counselling services to unmarried mothers | 23 |
| Counselling services to patients with family or marital problems | 41 |
| Patients requiring transportation arrangements | 57 |
| Patients requiring financial assistance | 40 |
| Patients requiring housekeeping services at home | 11 |
| Patients with vocational rehabilitation problems | 77 |
| Patients requiring prosthetic appliances | 19 |
| Patients requiring assistance in completing applications for pensions—Disability Pension, Old Age Assistance, Mothers' Allowance, etc. | 56 |
| Correspondence Courses arranged for High School students | 3 |

In addition, the Department looked after the following miscellaneous items:

| | |
|---|---|
| Discharged and deceased persons' effects and clothing released | 325 |
| Number of patients approved under Department of Public Health Poliomyelitis Grant | 170 |
| Orthopaedic appliances ordered for poliomyelitis patients | 277 |

# OUTDOOR CLINIC

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital

Sir:

It is my privilege to present the Annual Report of the City Centre Outdoor Clinic for the year ending March 31st, 1958.

| | |
|---|---|
| Patients treated at Clinic | 2,690 |
| New patients admitted to Clinic | 1,663 |
| Patients' visits | 11,812 |
| Distribution of patients' visits: Med. 5,801, Surg. 786, Derm. 746, Ortho. 383, Neuro-Surg. 563, G.U. 32, Paed. 1,209, Obst. 1,097, Gyn. 302, Psych. 43, E.N.T. 291, Opth. 599. | |
| Prescriptions | 10,443 |
| Laboratory Blood Work | 1,555 |
| Urinalysis | 1,308 |
| Refractions | 362 |
| Physiotherapy | 1 |
| X-Ray, University Hospital | 205 |
| X-Ray, X-Ray School | 75 |
| E.C.G. University Hospital | 18 |
| E.C.G. X-ray School | 55 |
| I. V. P. | 4 |
| R.A.I. Uptake | 2 |
| B. M. R. | 8 |
| E. E. G. | 10 |
| No. Patients' visits from City | 5,265 |
| No. Patients' visits from City Relief | 1,713 |
| No. Patients' visits from Province | 3,884 |
| No. Patients' from Provincial Relief | 850 |
| Patients admitted to University Hospital | 571 |
| Med. 188, Surg. 50, Derm. 13, Ortho. 13, Neuro-Surg. 9, G.U. 2, Paed. 48, Obst. 158, Gyn. 26, T & A 33, ENT 8, Opth. 19 Psych. 5. | |
| Patients admitted to Royal Alexandra Hospital | 1 Surg. |
| Cash Collections: Clinic Cards, Drugs, Hospital Accounts etc. | $5,414.30 |

There has been a very marked increase in the number of new patients registered at the Clinic this year, resulting in a general increase in all departments, noticeably in the number of prescriptions filled, laboratory examinations and admissions to hospital. The statistics include a number of X-rays and Electrocardiograms which were done at the Provincial Government X-ray School and were to our mutual advantage.

The services of a student laboratory technician for all clinics has greatly facilitated our work.

A Neurology Clinic, under the direction of Dr. G. Monckton, is now being held every two weeks. It is proving very satisfactory as far as patient care is concerned, but more teaching space and time would be advantageous.

The twice weekly Paediatric Clinics are being conducted by Dr. W. C. Taylor. The attendance of medical students is being increased and a very valuable teaching unit has developed. A special childrens' Cardiology Clinic with Dr. N. F. Duncan is held in conjunction with the regular Paediatric Clinic the first Monday of each month.

We appreciate the help of the Women's Auxiliary in providing good used clothing for needy patients, and for donations of money for emergency use. The children also enjoy the bags of candy which the Auxiliary donates at Christmas time.

The continued interest and co-operation of both the Attending and Consulting Staff Doctors, and of all the Business and Administrative departments is much appreciated.

Respectfully submitted

(Mrs.) H. C. Carlyle, R.N.
*Supervisor*

# PERSONNEL DEPARTMENT

Dr. A. C. McGugan,

Superintendent,

University of Alberta Hospital

Sir:

It is my pleasure to present to you the annual report of the Personnel Department for the year ending March 31st, 1958.

During the past year, the Poliomyelitis and Paediatric addition was placed in service, necessitating an increase in establishment of 181 employees. Total establishment rose to 1,127 employees from 946 employees.

Perquisites in the form of meals was discontinued April 1, 1957 and incorporated into salary on the basis of $10.00 per month, for each daily meal entitlement. Salary schedules, with the exception of those covering administrative, clerical and maintenance personnel, were increased by approximately five per cent, January 1, 1958. Total expenditure for salaries and wages for the year amounted to $2,836,491.59, an increase of $599,509.23 over the previous year.

A decided easing in the supply of available personnel was noticeable during the year, with the establishment of graduate nurses maintained at full strength from October, 1957 to March, 1958.

Staff turnover declined during the year and is shown below.

| | Budgeted Establishment 1957-58 | Budgeted Establishment 1958-59 | Terminations 1957-58 | Personnel Complement March 31, 1958 |
|---|---|---|---|---|
| Administration | 83 | 84 | 26 | 83 |
| Graduate Nurses | 224 | 278 | 142 | 297 |
| Certified Nursing Aides | 56 | 80 | 26 | 55 |
| Ward Clerks | 15 | 23 | 2 | 23 |
| Ward Aides | 91 | 108 | 142 | 109 |
| Orderlies | 58 | 71 | 29 | 73 |
| Nurses' Home & Internes' Quarters | 24 | 29 | 7 | 24 |
| Medical Records | 19 | 21 | 8 | 22 |
| Anaesthesia | 1 | 1 | 0 | 1 |
| Clinical Laboratories | 30 | 33 | 19 | 28 |
| Pharmacy | 9 | 9 | 5 | 9 |
| Orthopaedics | 3 | 3 | 0 | 3 |
| Ophthalmology | 1 | 1 | 0 | 1 |
| Rehabilitation | 33 | 36 | 16 | 31 |
| X-Ray | 19 | 23 | 14 | 19 |
| Dietary | 113 | 121 | 118 | 123 |
| Housekeeping | 57 | 69 | 55 | 66 |
| Janitors | 25 | 32 | 11 | 31 |
| Linen Repair | 10 | 11 | 2 | 11 |
| Laundry | 41 | 55 | 49 | 45 |
| Maintenance | 34 | 39 | 15 | 42 |
| | 946 | 1,127 | 686 | 1,096 |

Respectfully submitted,

J. L. PEDDEN,
*Personnel Officer*

# SPECIAL SERVICES

# SPECIAL SERVICES

Dr. A. C. McGugan,

Medical Superintendent,

University Hospital

Sir:

It is my privilege to report the work that has been done under the auspices of the Special Services Committee of the University Hospital for the fiscal year 1957 -58. The Committee was set up by the University Hospital Board in 1956 to undertake the direction of the development of special diagnostic and treatment services being developed in various hospital departments. While the major part of the work sponsored by the Committee has been in the field of cardiac diagnosis and cardiac surgery, a number of other developments have also been undertaken.

In the Cardiovascular Diagnostic unit under the direction of Dr. R. S. Fraser, 129 cardiac catheterizations were carried out. In addition there were 91 direct cardiac pressures and left auricular pressures taken, 101 arterial oxygen saturations or ear oximetry studies made, 9 arteriograms and 534 blood pH studies done. The cardiovascular team carried out all the basic diagnostic studies to select cases suitable for cardiac surgery and carried on the complex studies of heart function and circulation during operative procedures. They have also done the immediate post-operative follow-up of the patients and many of the cases previously operated on have been brought back to hospital in the Kinsmen Club Research Bed to have longer term follow-up assessments made. Dr. R. E. Rossall, who has had considerable training and experience in the cardiovascular field in England, joined the unit in November and his assistance has extended the use of this service. Pulmonary diagnostic studies have been confined to the spirography techniques set up by Dr. T. H. Aaron. Further development in this area must wait until the services of a full-time physician specially trained in these techniques is available.

The technique of open heart surgery using the bubble oxygenator has been developed by the team under the direction of J.C. Callaghan to a very high level of proficiency and is one of the outstanding cardiac surgery units in this country. A total of 53 cases have been done, 35 of these in the year currently under review. The patients range in age from newborn to 38 years. They have had a wide range of cardiac defects for which there was no satisfactory treatment before the development of intracardiac surgery. Further improvement in apparatus is being made and new and more efficient types of oxygenators will be in use in the coming year. The unit is greatly indebted to Dr. D. I. Buchanan

and the Red Cross Blood Transfusion Service for the great assistance they have given in working out the many special transfusion problems related to this type of operation and supplying the special blood required.

Dr. Cecil Couves joined the surgical team during the year and has made a very significant contribution to the work of this unit.

In addition to the open heart surgery, the work in the surgical treatment of vascular disease of the great vessels and peripheral vessels using artificial vessel grafts has continued. The use of stored homografts has been superseded by the development of suitable fabric grafts making the operation of a vascular bank no longer necessary. The extracorporeal circulation has been used in addition to the open heart surgery for the treatment of malignant lesions of the limbs by a perfusion technique. The results of this have yet to be fully evaluated but the outlook is encouraging.

The peripheral vascular clinic has continued. This unit gives diagnostic and treatment advice to patients with vascular disease in the limbs. Seventy-two complete studies were done during the year. Each case has a careful clinical work-up and studies of the peripheral circulation made. The service makes it possible in most cases to arrive at a definite diagnosis and to recommend appropriate treatment.

The artificial kidney was obtained at the close of the previous fiscal year. The unit was put into experimental operation in the past year at the McEachern Cancer Research Laboratory where the team under Dr. J. O. Metcalfe has gained experience with its use on animals. The team has become quite proficient in its use and a large number of dialyses in animals have been done. The first patient was dialysed in April. While the dialysis was wholly successful, unfortunately the patient died from other causes. Work is being done to assess the new disposable coil for the kidney. For some time in the future experimental work with the kidney will continue in order to keep the team fully conversant with the operation of the unit in order that cases requiring dialyses can be promptly and efficiently attended to.

The endocrinology and metabolism unit of the Department of Medicine has carried on the development of methods for measuring blood hydroxycorticosteroids. Dr. Lionel McLeod, who was awarded the distinction of being made a Markle scholar by the John and Mary Markle Foundation in New York, joined the Department of Medicine in July and will be undertaking the immediate direction of work in this field. The method for the measurement of urinary estrogens was started during the year and a new and improved procedure for measurement of pregnanediol and pregnanetriol has been on trial.

The method for the determination of protein-bound iodine was made available late in the year. This procedure requires very precise chemical technique and very careful technical control. The number of determinations that can be done is being gradually increased in order that the estimation will be available to other hospitals in the province and to other out patients, whose specimens are now sent out of the province to be done.

The enzyme laboratory was put in operation during the fall. First determinations have been glutamic oxaloacetic transaminase and lactic dehydrogenase. These are extremely useful procedures in the diagnosis of myocardial infarction and also in diseases where hepatic necrosis takes place such

as in hepatitis. A new method for serum amylase is under study and many other enzymatic analyses require development, and work on these will proceed as time and staff permit.

Much of the work done under the Special Services Committee has been reported at medical meetings locally and at other centres and by publication. Details of these are given in the reports of the various departments.

I should like to point out that the development of services under this Committee is usually of a co-operative nature between one or more departments. There has been an excellent spirit of co-operation on the part of all the departments concerned in the hospital and this has been a major factor in the progress that has been made. The Committee has had the fullest co-operation from the staff at the McEachern Cancer Research Laboratory at the University of Alberta where much of the basic research related to the development of special services within the hospital is carried out.

Respectfully submitted,

R. Edward Bell, M.D.

*Co-Ordinator of the*
*Special Services Committee*

RESEARCH

# LABORATORY TECHNICIAN TRAINING SCHOOL

Dr. A. C. McGugan,
Medical Superintendent,
University of Alberta Hospital

Sir:

I am pleased to report the activities of the laboratory technician training school for the current fiscal year. During the year there were ten new students enrolled in the two year laboratory training course for medical laboratory technicians. Four students completed their training during the summer and fall of 1957. All these students sat the examinations of the Canadian Society of Laboratory Technologists and received their qualifications as registered technicians (R.T.). One of these students Miss Lorraine Gooding, attained the highest marks in practical and written examinations of the C.S.L.T. given in Edmonton. Hospital graduation and presentation of graduation pins was held on June 14th.

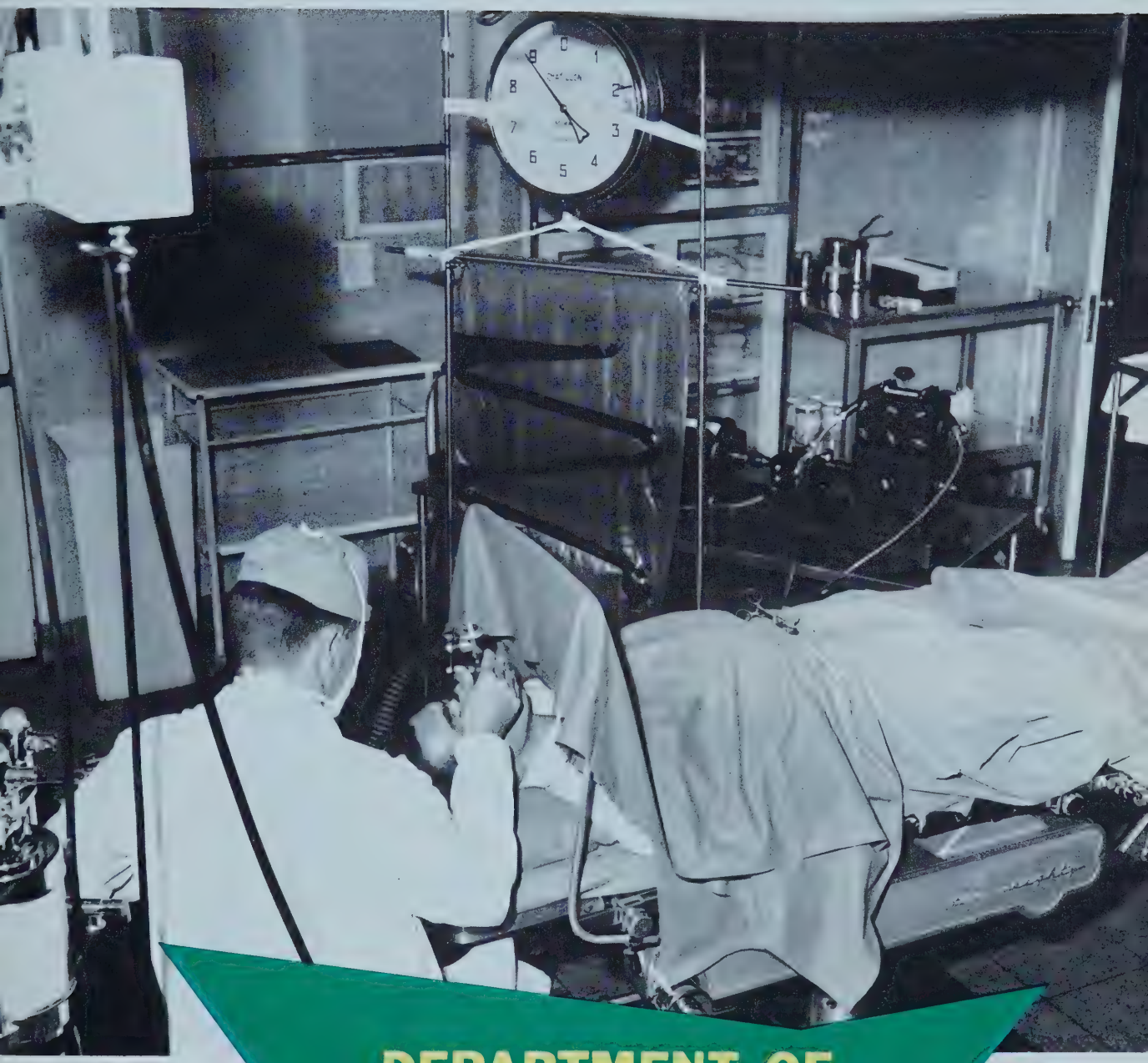
Miss Jean Matheson, B.Sc., R.T. continued as course supervisor and carried out a large part of the teaching. Other senior members of the staff in all laboratory sections carried on bench instruction in their individual sections. I wish also to thank Dr. R. D. Stuart and Dr. J. W. Macgregor at the Provincial Laboratory of Public Health and Dr. D. I. Buchanan at the Red Cross Blood Transfusion Centre and their respective staffs for help that they have given in this teaching. With the extension of the laboratory, some laboratory and office space was provided for the training school. This will serve temporarily to meet the requirements for teaching space away from the regular routine laboratories.

The teaching program is the main sourse of technicians for this hospital and while this so far has not met our needs for technicians, it is not possible to increase the present course beyond the ten enrolled each year.

I wish to acknowledge here the support given the training school by the Department of Public Health through a Federal-Provincial grant.

Respectfully submitted,

R. Edward Bell, M.D.,
*Director*



# DEPARTMENT OF SURGERY

Artificial Kidney

Heart-Lung Pump—Open-Heart Surgery

# DEPARTMENT OF SURGERY

Dr. A. C. McGugan,

Superintendent,

University of Alberta Hospital

Sir:

It is my privilege to present to you at this time a report of the Department of Surgery in the University of Alberta Hospital for the year ending March 31st, 1958.

It has been a source of satisfaction to all of us in the Department of Surgery to see the University of Alberta Hospital continue in its role as the major medical centre of the Province of Alberta and to note the increase in the number of surgical patients admitted, both for diagnosis and operation, during the last year. We are more conscious than ever of the important role played by the Department of Medicine in the diagnostic field, and by the Department of Anesthesia and other clinical departments who play their particular parts in aiding the Department of Surgery to carry out its responsibilities to the public of the Province.

The Surgical Division of the Cardiovascular Unit in cooperation with many other clinical units in the hospital, particularly the Medical Division of the Cardiovascular Unit, the Department of Anesthesia, the Department of Laboratory Services, the Red Cross Blood Bank Service and others too numerous to mention, but each one playing its part in the project, have now completed sixty-one cases in which extra-corporeal circulation has been used for open heart surgery using the bubble oxygenator. The lesions have ranged from "blue babies" to defects between the various chambers of the heart, obstruction in the pulmonary vessels and combinations of these lesions in the more rare forms. The over-all performance of the pump has been satisfactory and there have been no major problems arising from the pump-oxygenator itself. The team is now well organized and the actual operating time for procedures has become less and the patients seem to be doing better in the postoperative period with fewer complications. The Cardiac Recovery Room has been satisfactory and there has always been at least one patient in it and occasionally as many as three at one time. The policy has been developed that one case is operated upon each week and in each month an extra case is permitted, so that five cases a month have been carried out during the last year.

The Surgical Section of the Cardiovascular Unit has recently brought in a film oxygenator which will, we hope, be in operation within the next year and will be a new departure in this field and will simplify the overall organization of the pump team, will require less blood and will be easier to maintain.

*Arterial Surgery.* Further cases have been operated upon using prostheses to bypass occluded femoral arteries and the over-all results have been satisfactory but it is, of course, too early as yet to finally evaluate this type of surgical replacement. In the aortic field nylon prostheses have been satisfactorily employed and as well surgeons in this field have been using dacron and teflon fabrics to study their over-all tensile strength. Homografts have been practically eliminated.

*Perfusion of Organs Containing Cancer.* It has been satisfying to the Surgical Department to report that Dr. Cecil Couves has joined Dr. Callaghan in the Cardiovascular field and on three occasions now Dr. Couves has utilized extra-corporeal circuit for the perfusion of limbs containing malignancy. The nitrogen mustard compounds have been inserted by this perfusion technique and it is hoped that the results of further follow-up will show encouraging control of tumors which otherwise would have gone beyond normal therapeutic measures. This is another field in which the use of extra-corporeal circulation should prove of great value. Chemotherapy has also been used as a supplement to abdominal surgery recently in the University Hospital and this would seem to be a new frontal attack upon metastatic malignancy which is exciting and offers some promise.

*The Peripheral Vascular Clinic* has had an increasing growth in the year 1957. Dr. R. A. Macbeth has been in charge of this section and a total of seventy-two complete records of patients seen in the year 1957 are available for study. The type of case seen in the unit is perhaps best shown by a breakdown which reads as follows:

Arterial Disease

*Lower Extremity*

Claudicants — 24
Trophic Change — 7
Acute Ischemia — 1
Functional Arterial Disease — 4

Making a total of 36 cases of lower extremity arterial disease.

*Upper Extremity*

Organic occlusive vascular arterial disease — 2 Vasospastic phenomenon —1.

Making a total of 3 cases of arterial disease of the upper extremity.

*Venous Disease*

There were 9 patients seen:
Varicose veins — 6
Postphlebitis syndrome — 3

In addition to this there were a number of patients seen whose symptoms were not considered to be due to peripheral vascular disease, either arterial or venous.

There are several studies under way at the moment, particularly on the evaluation of drugs in the treatment of claudication and these claudicants have been carefully followed by monthly assessment on the claudicometer and it is the plan of the unit to continue with the study until we have thirty patients with complete studies available. The key to the drug study is kept by the Pharmacy and at the moment it is, of course, impossible for us to report on the results of the study.

The Peripheral Vascular Unit has continued to give invaluable consultation service to all the clinical departments in the field of peripheral vascular disease.

*The Artificial Kidney.* Late in 1956 it was suggested that an Artificial Kidney Team should be developed in the University of Alberta Hospital. The Division of Urology of the Department of Surgery was given the responsibility of organizing this unit.

Various centres which were presently using an artificial kidney were contacted and in February 1957, Dr. J. O. Metcalfe visited the Mayo Clinic and spent several days with Dr. Frank Maher and Dr. H. Odel, who were in charge of the Artificial Kidney Unit there. It was decided that the Skeggs-Leonards Dialyzing Unit would be most suitable to our hospital. Through the Special Services Grant this type of kidney was purchased from Western Reserve University and Dr. Metcalfe spent a week there in the department of Dr. Leonards who had designed this kidney.

This unit was placed in the McEachern Laboratory. Under the kind auspices of Dr. K. Kowalewski a technician was engaged on a half-time basis. Dr. P. Allen, followed by Dr. H. Engel, residents in their basic science year, were assigned to the project.

During the first year, our project was to become familiar with the function of the kidney. Several modifications were incorporated into the unit. Acute experiments were conducted on dogs which were made azotemic by either high small bowel ureteral transplant or bilateral nephrectomy. The efficiency of the artificial kidney in correcting the resulting biochemical imbalance was well shown. An article detailing these results was published by Dr. Allen and Dr. Metcalfe in the Alberta Medical Bulletin. A project was carried out by Dr. Engel and Dr. Metcalfe to show the effectiveness of the kidney in the dialysis of toxic levels of salicylates. This work has been written up and submitted for publication.

In April, 1958, the opportunity was presented to use the artificial kidney clinically. A patient with a postoperative renal shutdown in severe azotemia and hyperkalemia was transferred to the University Hospital and dialyzed. This procedure was successful as far as the function of the kidney was concerned.

The Artificial Kidney Team are most grateful to Dr. Bell of the Department of Clinical Laboratories for his advice, encouragement and supervision which has contributed so much to the success of the project.

During the last year two geographic full-time appointments have been made in the Department of Surgery. These two appointments were awarded to Dr. Robert Macbeth and Dr. R. Cameron Harrison who now have their consulting offices in the University Hospital two afternoons a week and the remainder of their time is devoted to undergraduate and graduate teaching and clinical and basic fundamental research. Their contributions to the Department of Surgery in this institution has already been very worthwhile.

Miss Seale and her colleagues in the operating rooms of the University Hospital have continued to work under great difficulties. It is a tribute to the morale and efficiency of this unit that we have been able to carry on the large operating schedules with the facilities that are present and needless to say we are all looking forward to the opening of the new service wing which will give us a new operating room section.

The Emergency Unit also has been crowded and the amalgamation of Out-Patient Department and Emergency Unit in the new service wing will be a tremendous improvement in the over-all service that our institution is able to provide for the people of Edmonton and the people of Alberta.

Dr. T. S. Wilson has continued as Chairman of the Infections Committee of the University Hospital and has the complete cooperation of Dr. R. D. Stuart of the Department of Bacteriology. The keen interest that these two staff men have taken in this problem has markedly improved the over-all situation in the hospital and I think at the present time our record is comparable to any similar hospital in Canada, and with the perseverance and continued "awareness" of the problem by the various members of our staff, both medical and surgical, we hope to successfully combat this continuing problem which is world wide.

Dr. B. Margolus has recently been appointed to the staff.

The following is a list of papers published, projects accomplished in preparation for publication, subject under investigation and scientific addresses given by members of the Surgical Staff and Surgical House Staff for the year ending March 31st, 1958:

Norvell, S. T., Jr., M.D. *The treatment of hyperthyroidism.* Alberta Medical Bulletin, 21: 54-62, May, 1957.

P. B. R. Allen, M.D. and J. O. Metcalfe, M.D. *Preliminary experiences with Skeggs-Leonards Artificial Kidney.* Alberta Med. Bulletin Vol. 23. No. 1, February, 1958. Supported by Artificial Kidney Grant No. 309, University of Alberta Hospital.

MacKenzie, Walter C., M.D., Norvell, Stevens T., Jr., M.D. *Pancreatitis.* Modern Medicine of Canada, 13: 69-75, March, 1958.

F. Gouws, M. D. and R. C. Harrison, M.D. *The influence of the vagus nerve on antral function.* Canadian Journal of Surgery 1958. Supported by N.R.C. Grant No. 557. Presented at N.R.C. Meeting in Banff, 1957.

F. Gouws, M. D., F. O. Silbermann, M.D. and W. C. MacKenzie, M. D. *The effect of Nilevar on healing of experimental wound.* Canadian Journal of Surgery 1958. Supported by Nilevar Trust (Searle, U.S.A.).

H. Shimizu, M.D. and R. C. Harrison, M.D. *Further studies on acid inhibition by the gastric antrum.* Supported by N.R.C. Grant No. 557 and General Research Trust No. 160. Presented at N.R.C. Meeting in Banff, 1958.

O. Silbermann, M. D. and R. C. Harrison, M. D. *Production of duodenal ulcers in dogs.* Supported by General Research Trust No. 160. Presented at N.R.C. Meeting in Banff, 1958.

C. Krause, M.D. and A. McCarten, M.D., *Use of Ivalon prosthesis as a replacement for the common bile duct.* Supported by Medical Research Grant No. 106.

M. H. Friedman, M. D., J. C. Callaghan M.D., T. Shnitka, M.D. and Dr. Reese. *Study on woven polythene prosthese for replacement of the aorta.* Supported by N.R.C. Grant No. 589.

P. Allen, M.D. and S. Kling, M.D. *Experimental portal hypertension in dogs.* Supported by General Research Trust No. 165.

E. C. Elliot, M.D. and J. C. Callaghan, M.D. *All plastic ventricle type pump with plastic triscupid valve.* Supported by Canadian Life Insurance Medical Fund. N.R.C. No. 589-623.

T. Shnitka, M.D. and K. Kowalewski, Ph.D., M.D. *Observation on experimental methylcholanthrene gall bladder stones in guinea pigs as a possible tumeregenesis.*

R. C. Harrison, M.D., H. T. G. Williams, M.D. and W. Pisesky, M.D. *Effect of various operations for duodenal ulcer in protecting the dog from ulceration following an ileal implant into the duodenum.* Supported by N.R.C. Grant No. 557.

S. Norvell, M.D. and W. C. MacKenzie M. D. *Urinary pepsinogen in patients with gastric carcinoma.* Supported by N.C.I. No. 210.

C. M. Couves, M.D. and J. Quirk, M.D. *Studies on experimental aortic aneurysms in rats under sweet pea meal.* Supported by Medical Research Grant No. 44.

C. M. Couves, M. D. and J. Quirk, M. D. *Studies on irreversible shock in dogs.* Supported by Medical Research Grant No. 143.

D. Triantaphyllopoulos, M.D., G. E. Edwards, M.D. and W. C. MacKenzie, M. D. *Comparative study of action of dicumarol and heparin on experimental animals.* Supported by Medical Research Grant No. 134.

E. C. Elliot, M.D. and J. C. Callaghan, M.D. *Extracorporeal circulation in cardiac surgery.* Supported by Infant Heart Operations Trust, D. R. B. No. 9350-11.

J. C. Callaghan, M.D. and E. C. Elliot, M.D. *Experiments of polyethylene oxygenator.* Supported by N.R.C. No. 589-623, General Research Trust No. 159.

*"Basic Problems Being Considered in Cancer Research and Cancer Research Being Done at the McEachern Laboratory"*— by Dr. W. C. MacKenzie at the Annual Meeting of the Canadian Cancer Society in Lethbridge, March 30th, 1957.

*"The Place of Surgery in Cancer Therapy"*— presented by Dr. W. C. MacKenzie at a public meeting sponsored by the Canadian Cancer Society, Alberta Division, in Edmonton, April 8th, 1957.

Dr. W. C. MacKenzie discussed the following paper by Dr. D. W. Elliott, Dr. R. D. Williams and Dr. R. M. Zollinger at the American Surgical Association Meeting in Chicago on May 8th, 1957— *"Alterations in the pancreatic Resistance to Bile in the Pathogenesis of Acute Pancreatitis."*

*"Some Observations on the Surgical Treatment of Pancreatic Lesions"*— Dr. W. C. MacKenzie presented this paper at a meeting of the Omaha-Douglas County Medical Society in Omaha, Nebraska, on November 12th, 1958.

Dr. W. C. MacKenzie discussed the following paper by Dr. Amer, Dr. Farhat and Dr. Weeks at the Western Surgical Association meeting in Salt Lake City on November 21st, 1957— *"The Effect of Intravenous Nitrogen Mustard Upon the Healing of Abdominal Wounds."*

Dr. W. C. MacKenzie was the Guest Speaker at the Vancouver General Hospital Postgraduate Course in Vancouver, B.C., February 3, 4 and 5, 1958, at which time he presented the following papers:— *"A 'New Look' at Diverticulitis"*, and *"Complications of Biliary Calculi"*. Dr. MacKenzie's movie on *"Ventral Hernia"* was also shown at this course followed by a discussion.

*"The Differential Diagnosis of Jaundice"*— presented by Dr. R. A. Macbeth to the Vegreville and District Medical Society on March 13th, 1957.

*"Nodular Goiter"*— presented by Dr. R. A. Macbeth at the Medical Short Course, Edmonton, November 14th, 1957.

*"Limitations in the Surgical Treatment of Duodenal Ulcer"* and *"Fashions in the Treatment of Carcinoma of the Breast"*. These two papers were presented by Dr. R. C. Harrison at the meetings of the Saskatchewan Division and the Manitoba Division of the Canadian Medical Association in October, 1957.

*"The Treatment of Unusual Conditions Encountered Within the Abdomen"*— presented by Dr. R. C. Harrison at the District Medical Meeting, Wainwright, Alberta, November, 1957.

*"Pediatric Orthopaedics"*— presented by Dr. G. L. Wilson at the Pediatric Refresher Course, University of Alberta Faculty of Medicine, Edmonton, October, 1957, and to the Grande Prairie Medical Association.

*"Peritoneal Shunts for Hydrocephalus"*— address given by Dr. T. J. Speakman at the Canadian Neurological Society Convention in Saskatoon, June, 1957.

Dr. T. S. Wilson participated in a panel on *Surgical Infections* at the Clinical Congress of the American College of Surgeons in Atlantic City in October, 1957.

*"Treatment of Varicose Veins in Pregnancy"*— address given by Dr. T. S. Wilson at the Refresher Course for General Practitioners, Department of Obstetrics and Gynecology, University of Alberta Faculty of Medicine, Edmonton, February, 1958.

*"The Clinical Results of the first 35 Cases of Open Heart Surgery"*— presented by Dr. J. C. Callaghan to the Royal College of Surgeons Meeting in Montreal, October, 1957.

Dr. J. C. Callaghan participated in a symposium on *"Extracorporeal Circulation — The Acid Base Changes in Extracorporeal Circulation"* at a meeting of the United States Public Health Association in Chicago, September, 1957.

*"Hypothermia"*— presented by Dr. J. C. Callaghan at a Sectional Meeting of the American College of Surgeons in March, 1957.

Dr. J. C. Callaghan participated in a Symposium on *"Cardiac Arrest"* at a meeting of the Alberta Ophthalmological Society in Edmonton, March 23rd, 1957.

*"Replacement Therapy of Great Vessel Aneurysms"*— address given by Dr. J. C. Callaghan at a meeting of the Lethbridge Medical Society, April 12th, 1957.

*"Islet Cell Tumors and Peptic Ulcers"*— by Dr. W. C. MacKenzie, Dr. S. T. Norvell, Jr. and Dr. B. L. Mathews. Presented by Dr. Norvell at the Annual Meeting of the Royal College of Physicians and Surgeons of Canada in Montreal, October 19th, 1957.

The following members of the Department of Surgery took part in the 90th Annual Meeting of the Canadian Medical Association in Edmonton, June 17, 18, 19, 20 and 21, 1957:

*CLINICAL PROGRAM IN COLOUR TELEVISION*

*Appendectomy*— Dr. S. Kling, Dr. R. J. Johnston, Dr. B. Michalyshyn.

*Hernia Repair*— Dr. H. Richard, Dr. M. Geissinger, Dr. G. R. Boileau, Dr. T. S. Wilson.

*Operation on the Heart*— Dr. J. C. Callaghan, Dr. C. S. Dafoe.

*Cardiac Arrest*— Dr. R. C. Harrison, Dr. D. F. Cameron, Dr. C. A. Ross.

*Varicose Veins and the Post-Phlebitis Limb*— Dr. R. A. Macbeth, Dr. W. F. M. Hall, Dr. R. J. Johnston.

*Gastrectomy for Duodenal Ulcer*— Dr. G. L. Willox, Dr. A. W. Hardy.

*Cholecystectomy and Cholangiogram*— Dr. J. M. Lees, Dr. R. E. Jespersen, Dr. C. A. Allard and Dr. B. Michalyshyn.

*Fracture Rounds*— Dr. D. C. Johnston, Dr. F. G. Day and Dr. J. P. Moreau.

*Physical Signs in Neurological Disease*— Dr. T. J. Speakman.

*Diverticulitis or Cancer of the Bowel*— Bowel Resection—Dr. W. C. MacKenzie, Dr. W. S. Anderson.

*The Early Treatment of Head and Spine Injuries*— Dr. T. J. Speakman.

*Present Trends in the Medical and Surgical Management of Peptic Ulcer*— Dr. W. C. MacKenzie participated in a Symposium on this subject.

*Staphylococcal Infections*— Dr. T. S. Wilson participated in a panel on this subject.

*The Treatment of Hyperthyroidism Associated with Other Medical Conditions*— Dr. R. C. Harrison was Chairman of a panel presenting this subject.

*Occlusive Vascular Disease*— Dr. J. M. Lees and Dr. J. C. Callaghan.

All of which is respectfully submitted,

WALTER C. MACKENZIE, M.D.,
*Director*

# OPERATING ROOM

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital

Sir:

The following is the report of the Operating Room of the University of Alberta Hospital for the year ending March 31st, 1958.

| | |
|---|---|
| Total Major Operations for 1956-57 | 3,396 |
| Total Major Operations for 1957-1958 | 3,294 |
| Decrease | |
| Total Minor Operations for 1956-1957 | 3,332 |
| Total Minor Operations for 1957-1958 | 3,326 |
| Decrease | |

*Classification of Operations:*

| | | | |
|---|---|---|---|
| General Surgery: | Major | 1,432 | |
| | Minor | 680 | 2,112 |
| Gynaecological Surgery: | Major | 422 | |
| | Minor | 728 | 1,150 |
| Genito-Urinary Surgery: | Major | 126 | |
| | Minor | 37 | 163 |
| Orthopaedic Surgery: | Major | 498 | |
| | Minor | 729 | 1,227 |
| Thoracic Surgery: | Major | 128 | |
| | Minor | 12 | |
| | Endoscopies | 86 | 226 |
| Plastic Surgery: | Major | 181 | |
| | Minor | 67 | 248 |
| Ophthalmology: | Major | 253 | |
| | Minor | 120 | 373 |
| Ear, Nose and Throat | Major | 23 | |
| | Minor | 271 | |
| | T. and A. | 353 | |
| | Endoscopies | 19 | 666 |
| Dental Surgery: | Extractions | 113 | 113 |
| Miscellaneous: | | 2 | |
| | Major | 3 | |
| | Minor | 10 | 15 |
| Neuro-Surgery: | Major | 228 | |
| | Minor | 99 | 327 |

*Anaesthetics in Operating Room*

| | |
|---|---|
| Cyclopropaine | 344 |
| Trilene | 11 |
| Vinethene | 20 |
| Ether | 761 |
| Caudal Block | 2 |
| Nitrous Oxide | 1 |
| Brachial Block | 33 |
| Local Block | 2 |
| Local | 733 |
| Spinal | 522 |
| Pentothal | 4,174 |
| Nupercaine | 5 |
| Epidural | 1 |
| | 6,609 |
| (None) | 11 |

Respectfully submitted,

(Miss) M. Seale, R.N.,
*Acting Supervisor*

# DEPARTMENT OF ANAESTHESIOLOGY

Dr. A. C. McGugan,
Medical Superintendent,
University of Alberta Hospital.

Sir:

During the year ending March 31st, 1958, the Department of Anaesthesia experienced a considerable increase in work, both in numbers of cases and total hours of anaesthesia. This necessitated the use of two operating rooms until late in the day. The opening of the sixth floor operating room for cases under local anaesthesia also helped to make this increased volume of work possible. It is believed that with all of the hospital beds now open and with the present high occupancy rate, we can estimate the maximum work load to be expected from now on.

During the past year one new member, Dr. J. Hemstock, has joined the Department. The requests for graduate training in Anaesthesia have been unprecedented and far exceed the facilities available.

During the year 6,980 anaesthetics were administered by the members of the department, a considerable increase over last year. There were 6,188 elective, and 792 emergent cases cared for, and 5,361 cases were cared for in the Post-Anaesthetic Recovery Room. The present Recovery Room is now overloaded and will be a difficult problem until the new facilities are ready.

| *Anaesthetic Agents:* | | *Anaesthetic Technics:* | |
|---|---|---|---|
| Pentothal-Nitrous | 3,532 | Open Drop | 224 |
| Cyclopropane | 1,214 | Partial Rebreathing | 555 |
| Ether | 1,403 | Carbon Dioxide Absorption | 3,815 |
| Trichlorethylene | 84 | Non-Rebreathing | 714 |
| Muscle Relaxants | 1,536 | Endotracheal | 1,329 |
| Pontocaine | 637 | Spinal | 915 |
| Nupercaine | 287 | Regional Block | 213 |
| Xylocaine | 81 | Hypothermia | 6 |
| Blood Transfusions | 606 | | |
| Blood Volume Expanders | 74 | | |
| Procaine | 5 | | |

During the year the Department has carried out a clinical and electroencephalographic investigation of Fluothane, a new non-explosive anaesthetic agent, and Anileridine, a synthetic opiate antagonist. An investigation of a new simple inexpensive cuirass for artificial respiration during endoscopy has been initiated.

PUBLICATIONS AND PAPERS—DEPARTMENT OF ANAESTHESIA:

The following are the papers published or given by this department for the period April 1, 1957 - March 31, 1958:

1. An Attempt to Correlate the Electroencephalographic Levels with the Clinical Signs During Fluothane Anaesthesia. E. A. Gain, M.D. and S. G. Paletz, L.R.C.P.
   Published in Canadian Anaesthetists' Society Journal, July, 1957.
2. Anaesthetic Experiences During Extracorporeal Circulation for Open Heart Surgery. E. A. Gain, M.D.
   Presented to Canadian Anaesthetists' Society Annual Meeting, June, 1957.
   To be published in Canadian Anaesthetists' Society Journal.
3. Ventilation During Anaesthesia. D. Kyle.
   Presented to Section of Anaesthesia—Canadian Medical Association Annual Meeting, June, 1957.
   To be published in Canadian Medical Journal.
4. The Effects of Chlorpromazine on the Pulmonary Circulation. K. Bradshaw, M.D., Resident and R. Fraser, M.D. (Dept. of Medicine).
   Presented to Western Division, Canadian Anaesthetists' Society Annual Meeting, March, 1958.
5. Physiological and Biochemical Changes with the Bubble Oxygenator During Open Heart Surgery.
6. Pneumoperitoneum: A Complication of Nasal Oxygen Therapy.

I wish to express our appreciation of the continued help and cooperation given by all members of the Administration.

Respectfully submitted,

E. A. Gain, M.D.,
*Director*

# OPHTHALMOLOGY AND OTOLARYNGOLOGY

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital

Sir:

It is my privilege to report to you that the Department of Ophthalmology and Otolaryngology has continued to function well in the services it has rendered to patients and in its teaching responsibilities to the Faculty of Medicine at both undergraduate and graduate levels. It has also contributed to the teaching of the School of Nursing .

The number of Eye, Ear, Nose and Throat cases admitted to our special ward and to the children's wards for treatment by members of the staff of our Department has been at a satisfactory level.

There has been a slight increase in the number of major and minor surgical procedures carried out by members of our Department. This has been made possible by the opening of an additional operating room for operations carried out under local anaesthesia.

We anticipate that next year the services of a Glaucoma Clinic for diagnostic purposes will be made available to patients who may be referred to the Clinic by practising physicians.

It is expected that in the coming year the Faculty of Medicine will make a Geographic Full Time appointment in the Department of Ophthalmology. This step, we believe, is sound and will prove mutually advantageous to the University and Hospital. Your co-operation in providing space and other facilities for the appointee is respectfully requested.

For your sympathetic understanding of the needs of our Department and for your efforts on our behalf we are grateful to you.

Respectfully submitted,

M. R. MARSHALL, M.D.
*Director*

# OBSTETRICS AND GYNAECOLOGY

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital.

Sir:

The past hospital year has been a busy one in our Department. On December 11th, we commenced our Prenatal Classes for expectant mothers. These classes, consisting of lectures and exercises and a tour of the obstetrical department, are held each Wednesday afternoon in space of the Department of Physical Medicine. Our enrolment is nearly one hundred and to date, thirty-three have been delivered—each in a singularly comfortable fashion. There have been an increased number of Rh sensitized mothers admitted for delivery and possible exchange transfusion. Our number of Caesarian sections has increased but 25% of these are repeaters.

Infection in mothers and newborns is minimal. We have maintained our routine of periodic cleansing of rooms and nurseries. The full time paediatric staff have contributed immeasurably to the improvement in our nursery care.

Our maternal complications have been few. We have increased our number of semi-private rooms and this has, to some degree, alleviated our bed shortage, although is has decreased our number of private rooms. Our nursing staff, by achieving an atmosphere of kindness, friendliness and efficient care (so foreign to current magazine concepts) have aided greatly in the successful care of mothers and babies. My special thanks are due to Mrs. Kathleen Bailie who has filled the position of Supervisor in Obstetrics so ably, during the past year.

*Obstetrical statistical summary:*

| | | | |
|---|---|---|---|
| Admissions | | 2,061 | |
| Discharged undelivered | | 109 | |
| Patients delivered | | 1,952 | of these Caesarian sections were 99 (5%) |
| Babies delivered— | | | |
| Liveborn | Male | 1,005 | including Twins Male 8 pairs |
| | Female | 926 | Female 10 pairs |
| | | | Mixed 4 pairs |
| Deadborn | Male | 19 | |
| | Female | 24 | |
| Maternal mortality | | 2 | (1) Toxaemia at term; fulminating eclampsia with intracranial haemorrhage. Admitted from a country hospital moribund. Delivered dead baby. Died 15 hours after admission. |
| | | | (2) Infectious hepatitis at 4 months gestation. Admitted from country in hepato-renal failure and died undelivered |
| Perinatal Mortality | | | |
| Stillbirths | | 43 | (Mature 10; Premature 20; non viable 13). |
| Neonatal (7 days) | | 33 | (Mature 13; Premature 15; non viable 5) |

Our gynaecological admissions have increased during the past year although the number and scope of surgical procedures has been much the same. We have pursued our usual active treatment of therapeutic abortions; 85% have been completed by D and C thereby minimizing blood loss and promoting quicker recovery. Our examining room has been well utilized for hospital and outdoor patient care examinations and has proven an excellent medium for teaching nurses and house staff. Vaginal cultures are taken on all admissions and this allows for the use of appropriate therapy quickly, when and if necessary. We have endeavored to maintain some routine of cleansing rooms. I feel this is absolutely necessary although it may decrease bed occupation slightly. Early ambulation, appropriate heat and the use of Sitz baths have contributed to the comfort and early recovery of our surgical patients.

The nursing care has been kindly and efficient as always.

*Gynaecological statistical summary:*

| | | |
|---|---|---|
| Admissions | 1,439 | |
| Surgery | | |
| Major | 457 | |
| Minor | 799 | |
| | 1,256 | |
| Gynaecological Mortality | 5 | (2 Carcinoma cervix uteri with regional metastases fistulae and pyonephroses. 2 P.M.'s.<br>3 Carcinoma ovary with generalized metastases. 1 P.M.) |

The forbearance and kindly cooperation of the Medical Superintendent, the Nursing Office and the Administrative Staff is gratefully acknowledged. The resident house staff gave willingly of their time and effort and to them I give grateful thanks.

Respectfully submitted,

J. Ross Vant, M.D.
*Director*

# HEALTH SERVICE

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital

Sir:

I herewith submit the annual report of the Health Service for the fiscal year ending March 31, 1958.

During the past year the Health Service was able to acquire the services of Mrs. I. Holmes, R.N. and Doctor William Buie. As a result student health coverage has been effectively broadened.

Preventive services offered to the hospital staff in the year 1957-58 consisted of nine hundred and one Mantoux tests of which two hundred and six were positive. Five hospital patients after admission were found to have tuberculosis. One hundred and thirty-seven staff personnel were exposed to these cases and were followed by Mantoux tests and x-rays. Typhoid immunization series (three injections) was given to three hundred and nineteen individuals and reinforcing doses to two hundred and two students and five hundred and seventeen hospital staff personnel. Salk vaccine was given to eight hundred and ninety-three employees and one hundred and fifty-four students. Prophylactic influenza vaccine as an intradermal injection, was given to two hundred and sixty-eight students and one thousand and thirty-four staff personnel. Diphtheria was diagnosed following admission in one patient. Forty-three exposed staff members had nose and throat cultures analysed, booster injections of diphtheria toxoid and prophylactic penicillin where indicated.

A considerable portion of Health Service time is directed toward physical and mental assessment of prospective employees and students. A total of one thousand, three hundred and thirty-seven physical examinations was done in the year 1957-58. Seven hundred and forty of these were pre-employment physical examinations. Five prospective employees were rejected for health reasons. Six employees who left the hospital staff were listed as undesirable for re-employment due mainly to persistent time loss in these cases. One hundred and fifty-four pre-entrance and fifteen pre-affiliation physicals were done on prospective student nurses. Fifty-nine physical examinations of student nurses completing their training were finalized. Three hundred and sixty-nine annual assessment examinations were completed on nursing staff.

The Health Service completed one hundred and seventy-two hospital Employer Compensation Board forms with respect to injuries sustained by employees on the hospital premises.

A complete medical is given to all student personnel such as nurses, dietitians, pharmacists, x-ray and laboratory staff, internes and nursing aide trainees. Two hundred and eighty-three students were admitted to hospital for a total of one thousand, two hundred and ten hospital days. The epidemic of influenza was responsible for one hundred and twenty-three admissions of which forty-six developed complications.

I wish to thank Miss MacArthur, Mrs. Holmes, Miss MacDonald, Doctor I. Holmes, Doctor W. Buie, the staff consultants and all departments for their generous co-operation.

Respectfully submitted,

F. B. Rodman, PH.D., M.D.
*Medical Director*

# MEDICAL STAFF

Dr. A. C. McGugan,

Superintendent,

University of Alberta Hospital

Sir:

The regular staff meetings are held on the first Monday of each month. They are well attended and the meeting, after a short business session, is made up of a presentation of general interest to the whole medical staff. Subjects presented in the year 1957 - 58 were as follows:

| | | |
|---|---|---|
| April, 1957 | A Preliminary Report on the Use of the Heart-Lung Pump on Clinical Cases at the University of Alberta Hospital. | Dr. J. C. Callaghan<br>Dr. R. S. Fraser<br>Dr. J. Dvorkin<br>Dr. S. Paletz |
| May, 1957 | Perinatal Mortality Report (University of Alberta Hospital) 1955-1956 | Dr. M. M. Hutton |
| June, 1957 | From Trade Guild to Royal College | Sir James Patterson Ross |
| Sept., 1957 | The Problem of Emphysema in a Large Treatment Hospital | Dr. T. H. Aaron<br>Dr. Colin Ramsay |
| Oct., 1957 | Results with Radioactive Isotopes | Dr. H. E. Duggan |
| Nov., 1957 | The Medical Student | Dr. J. S. Thompson |
| Dec., 1957 | Erythrocyte Survival Curves Using Chromium 51 | Dr. R. E. Bell |
| Jan., 1958 | Some Current Medical Problems of High Altitude Flight | Dr. J. W. Pearce |
| Feb., 1958 | Control of Rheumatic Fever | Dr. W. C. Taylor<br>Dr. Neil Duncan<br>Dr. A. Stewart<br>Dr. R. Fraser<br>Dr. J. Dvorkin |
| March, 1958 | The Transplantation of Bone Marrow | Dr. G. O. Bain |

The Executive of the Staff meets at noon every third Monday of the month for the discussion of matters to be presented to the Staff and to keep liaison between the Hospital Medical Staff and the Hospital Advisory Board. The Executive of the Staff for 1957-58 were:

Dr. O. Rostrup ---------- President
Dr. B. Michalyshyn ---------- Vice-President
Dr. K. A. C. Clarke ---------- Secretary
Dr. E. G. Kidd ----------
Dr. M. M. Hutton ----------
Dr. D. F. Cameron ----------
Dr. C. E. Holmes ----------
Dr. K. A. C. Clarke ---------- Chairman, Medical Records Committee
Dr. J. W. Macgregor ---------- Pathologist
Dr. A. C. McGugan ---------- Superintendent
Dr. B. Snell ---------- Assistant Superintendent

Respectfully submitted,

O. Rostrup, M.D.,
*President*

# LAUNDRY DEPARTMENT

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital

Sir:

I herewith submit the annual report of the Laundry Department for the year ending March 31, 1958.

The amount of linen washed, dried, and ironed in the past year was, 2,637,795 pounds of flat and tumbled work, and 155,210 pounds of starch-finish work for a total of 2,793,005 pounds. This is an increase of 212,370 pounds over the work done last year. All this work is being done in a five-day, forty-hour week.

A new laundry building is being planned for expansion of the laundry department and linen room, and it is hoped that a building large enough for still further expansion in the future will be built at this time.

I wish to thank all departments for their co-operation in the past year.

Respectfully submitted,

DANIEL SCHNEIDER,
*Laundry Manager*

# CARPENTRY

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital

Sir:

It is my pleasure to present the annual report of the "Carpenter Shop" for the period April 1st, 1957 to March 31st, 1958.

We have ten men in our department, seven carpenters, one plaster bricklayer and cement man, and two utility men; one of whom assists in the shop and the other assists with the cement work, etc.

With the completion of the Polio Wing and a new wing at the Nurses' Residence, we have been virtually swamped with work, and found it necessary to employ two extra carpenters, and two utility men for a period of seven months.

In addition to making a great deal of furniture and equipment we have had considerable work in re-locating, renovating and enlarging various services and departments, some of which were — Doctors' Room, Library, Medical Records, Clothes Room, new units in Pharmacy, House Staff Quarters, a considerable amount of work in the Rehabilitation and Physiotherapy Dept., acoustic tile on the entire ceiling of the Servery, Offices of the Superintendent, Assistant Superintendent, Directors of Medicine, Surgery, and offices for various geographic medical staff, considerable work in the X-ray and Laboratory Departments, Utility Rooms in Stations No. 31 and No. 32, and various other smaller projects. This, together with the customary maintenance, has made this a very busy year and we thank the Administration and all the departments for their kind support and co-operation.

It has been intimated that we are to have new shops in the near future! This is very welcome news, and we are looking forward to the time when we will have larger, more convenient and comfortable quarters.

Respectfully submitted,

J. S. Gibson,
*Carpenter Foreman*

# ENGINEERING DEPARTMENT

Dr. A. C. McGugan,
Superintendent,
University of Alberta Hospital

Sir:

I herewith submit the annual report of the Engineering Department for the year ending March 31, 1958.

During the past year the following work has been completed:

(1) Installation of dishwasher and renovation of kitchen on the second floor, Mewburn Pavilion.
(2) Installing of refrigerated air conditioner in Central Supply.
(3) Installing of refrigerated air conditioner in C.S. Storage Room.
(4) Installing of refrigerated air conditioner in Snack Bar.
(5) Remodelling of Seclusion Section of Psychiatry Ward, Section 14, into offices.
(6) Remodelling of Station 31 for additional Utility and Service Rooms.
(7) Removing of Clothes Room on first floor Main Hospital and installation of additional Laboratory in that section.
(8) Installing of Steam Heat in Paint Shop to keep in line with fire regulations.
(9) Alterations—removing and re-installing of numerous plumbing and sterilizing fixtures in Station 24.
(10) Installing additional Service Room facilities, Nursing Station 32.
(11) Remodelling of second floor, Main Hospital, to additional Doctors' Offices, Doctors' Room, Board Room, Records Department, etc.
(12) Removing and re-installing of No. 300 machine, X-Ray.

With the opening of the Polio Wing, it was necessary to increase our Staff. Additional Staff:

| | |
|---|---|
| Mr. R. Rice, | Mechanic |
| Mr. A. Pezzani, | Electrician |
| Mr. H. Durant, | Engineer Assistant |
| Mr. D. Chander, | Engineer Assistant |

The utilities used during 1957 were:

| | | |
|---|---|---|
| Power ---------- | 4,261,651 | K. W. Hours |
| Water ---------- | 11,021,360 | Cubic Feet |
| Steam ---------- | 91,078,000 | Pounds |

At present all equipment is in good repair and giving satisfactory service.

I would like to take this opportunity to thank you and all departments for their co-operation during the past year.

Respectfully submitted,

R. Roberts,
*Chief Engineer*

Mewburn Pavilion, East View

South Pavilion, East View

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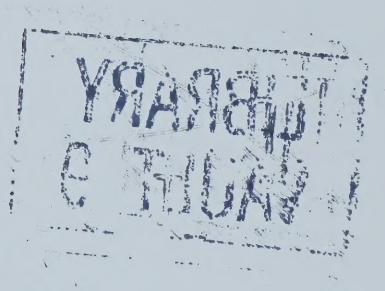

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